Company Tracking Number:

TOI: L071 Individual Life - Whole Sub-TOI: L071.101 Fixed/Indeterminate Premium - Single

Life

Product Name: 2001 CSO Flagship

Project Name/Number:

## Filing at a Glance

Company: Columbian Life Insurance Company

Product Name: 2001 CSO Flagship SERFF Tr Num: CMLM-125806065 State: ArkansasLH TOI: L07I Individual Life - Whole SERFF Status: Closed State Tr Num: 40214

Sub-TOI: L07I.101 Fixed/Indeterminate Co Tr Num: State Status: Approved-Closed

Premium - Single Life

Filing Type: Form Co Status: Reviewer(s): Linda Bird

Author: Regina Akulis, ACS, AIRC, Disposition Date: 09/17/2008

AIAA, ACP

Date Submitted: 09/09/2008 Disposition Status: Approved

Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

#### General Information

Project Name: Status of Filing in Domicile: Pending

Project Number: Date Approved in Domicile:

Requested Filing Mode: Review & Approval Domicile Status Comments: Similar forms were

submitted to Illinois, our state of domicile simultaneously with this submission.

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Market Type: Individual

Group Market Size:

Group Market Type:

Filing Status Changed: 09/17/2008

State Status Changed: 09/17/2008 Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

The forms attached to the Form Schedule are submitted for approval. The required Actuarial Memos and rates are enclosed.

There are no unique or innovative features in these forms. The policy specification pages contain hypothetical John

SERFF Tracking Number: CMLM-125806065 State: Arkansas

Filing Company: Columbian Life Insurance Company

State Tracking Number: 40214

Company Tracking Number:

TOI: L071 Individual Life - Whole Sub-TOI: L071.101 Fixed/Indeterminate Premium - Single

Life

Product Name: 2001 CSO Flagship

Project Name/Number:

Doe data/information. All variable information is bracketed. The forms are written in readable language. Licensed agents will market these forms on an individual basis in the Ordinary Market.

Form No. 1F149-CL is a Whole Life Insurance Policy, issue ages 0 - 80, age last birthday. Premiums are payable to age 90. The face amount is payable at the death of the Insured. This policy may be issued on a sex distinct or unisex basis. The unisex plan will be used for policies issued in an Employer/Employee situation. Endorsement Form No. 1E904-CL will be issued with the Policy form to amend the Basis of Values provision for unisex issues. The Policy is Participating and will be illustrated. The required Actuarial Certification is enclosed.

In compliance with Ark. Code Ann. 23-79-138, there is a welcome letter that accompanies every policy that lists all the Company and servicing agent information including name, address, and telephone number. There is also an Important Notice form (4548CFG) which will accompany every policy that notifies the insured of the Arkansas Insurance Department address and telephone number.

The Guaranty Association form that accompanies each policy complies with the sample set forth as Appendix B of Rule and Regulation 49.

The riders listed below will be used with the Whole Life Policy Form 1F149-CL when requested by the Owner.

Form No. 1H813-CL, Ten Year Renewable Level Term Rider, issue ages 18 – 60. This rider provides additional level term insurance on the Primary Insured. This rider is renewable to age 70.

Form No. 1H814-CL, Other Insured Ten Year Renewable Level Term Rider, issue ages 18 – 60. This rider provides level term insurance on additional insureds. This rider is renewable to age 70.

Form No. 1H815-CL, Paid Up Additions Rider – Single Premium, issue ages 0 – 80. This rider provides a traditional death benefit and guaranteed cash values.

Form No. 1H816-CL, Paid Up Additions Rider – Increasing Death Benefit, issue ages 0 – 80. This rider provides a traditional death benefit and guaranteed cash values.

SERFF Tracking Number: CMLM-125806065 State: Arkansas
Filing Company: Columbian Life Insurance Company State Tracking Number: 40214

Company Tracking Number:

TOI: L071 Individual Life - Whole Sub-TOI: L071.101 Fixed/Indeterminate Premium - Single

Life

Product Name: 2001 CSO Flagship

Project Name/Number:

In addition, the riders listed below (currently pending with your Department under SERFF Submission CMLM-125806060) will be used with the Whole Life Policy Form 1F149-CL when requested by the Owner.

Form No. 1H810-CL, Accidental Death Benefit Rider, issue ages 15 – 55.

Form No. 1H811-CL, Waiver of Premium, issue ages 15 – 55.

Form No. 1H812-CL, Children's Term Insurance Rider, issue ages 15 days to 18 years. This rider provides level term insurance for all eligible children of the Insured.

Form No. 1H817-CL, Accelerated Death Benefit Rider, issue ages 0 – 80. At the request of the Owner, this rider provides an acceleration of 50% of the death benefit of the policy, upon diagnosis of the Insured's terminal condition and a life expectancy of 12 months or less.

Application Form No. A408-CL will be used to apply for Policy Form No. 1F149-CL. This application form is currently pending with your Department under SERFF Submission CMLM-125806060. It will also be used with previously approved Form No. A314-CL, Statements Made to Medical Examiner. This form was approved by the Department on March 23, 2005 under File No, 28989.

Application Form No. A15-CL will be used to reinstate Policy Form No. 1F149-CL. It is currently pending with your Department under SERFF Submission CMLM-125806060.

Also included in this filing are our required Readability and Rule and Regulation 19 certifications.

Please contact me if you need any additional information or have any questions. I can be reached by telephone at 607-724-2472, extension 7375 or by email at Regina.Akulis@CFGLife.com.

Sincerely,

Regina M. Akulis, ACS, AIRC, AIAA, ACP

Sr. Contract Analyst

Company Tracking Number:

TOI: L071 Individual Life - Whole Sub-TOI: L071.101 Fixed/Indeterminate Premium - Single

Life

Product Name: 2001 CSO Flagship

Project Name/Number:

## **Company and Contact**

#### **Filing Contact Information**

Regina Akulis, Sr. Contract Analyst Regina. Akulis@CFGLife.com

PO Box 1381 (607) 724-2472 [Phone] Binghamton, NY 13902 (607) 724-2801[FAX]

**Filing Company Information** 

Columbian Life Insurance Company CoCode: 76023 State of Domicile: Illinois

PO Box 1381 Group Code: 535 Company Type:

Vestal Parkway East

Binghamton, NY 13902 Group Name: State ID Number:

(607) 724-2472 ext. [Phone] FEIN Number: 16-1321681

-----

# **Filing Fees**

Fee Required? Yes

Fee Amount: \$300.00

Retaliatory? No

Fee Explanation: \$50/form X 6 forms = \$300.

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

Columbian Life Insurance Company \$300.00 09/09/2008 22380269

SERFF Tracking Number: CMLM-125806065 State: Arkansas

Filing Company: Columbian Life Insurance Company State Tracking Number: 40214

Company Tracking Number:

TOI: L071 Individual Life - Whole Sub-TOI: L071.101 Fixed/Indeterminate Premium - Single

Life

Product Name: 2001 CSO Flagship

Project Name/Number:

# **Correspondence Summary**

### **Dispositions**

StatusCreated ByCreated OnDate SubmittedApprovedLinda Bird09/17/200809/17/2008

Company Tracking Number:

TOI: L071 Individual Life - Whole Sub-TOI: L071.101 Fixed/Indeterminate Premium - Single Life

Product Name: 2001 CSO Flagship

Project Name/Number: /

# **Disposition**

Disposition Date: 09/17/2008

Implementation Date:

Status: Approved

Comment:

Company Name:	Overall % Rate	Written Premium	# of Policy	Premium:	Maximum %	Minimum %	Overall %
	Impact:	Change for this	Holders		Change (where	Change (where	Indicated
		Program:	Affected for		required):	required):	Change:
			this				
			Program:				
Columbian Life Insurance	e %	\$		\$	%	%	%
Company							

Company Tracking Number:

TOI: L071 Individual Life - Whole Sub-TOI: L071.101 Fixed/Indeterminate Premium - Single

Life

Product Name: 2001 CSO Flagship

Project Name/Number:

Item Type	Item Name	Item Status	<b>Public Access</b>
Supporting Document	Certification/Notice		Yes
Supporting Document	Application		No
Supporting Document	Life & Annuity - Acturial Memo		No
Supporting Document	Illustration Actuary Certifications		Yes
Form	Whole Life Insurance Policy		Yes
Form	Unisex Endorsement		Yes
Form	Ten Year Renewable Level Term Rider		Yes
Form	Other Insured Ten Year Renewable Terr	m	Yes
Form	Paid Up Additions Rider - Single Premiu	m	Yes
Form	Paid Up Additions Rider - Increasing Death Benefit		Yes
Rate	Flagship Rates		Yes
Rate	Flagship Rider Rates		Yes

Company Tracking Number:

TOI: L071 Individual Life - Whole Sub-TOI: L071.101 Fixed/Indeterminate Premium - Single

Life

Product Name: 2001 CSO Flagship

Project Name/Number: /

### **Form Schedule**

Lead Form Number: 1F149-CL

Review Status	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
	1F149-CL	Policy/Cont Whole Life Insurance ract/Fratern Policy al Certificate	e Initial			1F149-CL.pdf
	1E904-CL	Policy/Cont Unisex Endorsemen ract/Fratern al Certificate: Amendmen t, Insert Page, Endorseme	t Initial			1E904-CL.pdf
	1H813-CL	nt or Rider Policy/Cont Ten Year Renewable ract/Fratern Level Term Rider al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	e Initial			1H813-CL.pdf
	1H814-CL	Policy/Cont Other Insured Ten ract/Fratern Year Renewable al Term Rider Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial			1H814-CL.pdf

SERFF Tracking Number: CMLM-125806065 State: Arkansas 40214

Filing Company: Columbian Life Insurance Company State Tracking Number:

Company Tracking Number:

TOI: L07I Individual Life - Whole Sub-TOI: L07I.101 Fixed/Indeterminate Premium - Single

Life

Product Name: 2001 CSO Flagship

Project Name/Number:

1H815-CL Policy/Cont Paid Up Additions Initial 1H815-CL.pdf

ract/Fratern Rider - Single

al Premium

Certificate: Amendmen t, Insert Page,

Endorseme nt or Rider

1H816-CL Policy/Cont Paid Up Additions Initial 1H816-CL.pdf

ract/Fratern Rider - Increasing

Death Benefit al

Certificate: Amendmen t, Insert Page,

Endorseme nt or Rider



IT IS IMPORTANT THAT YOU READ YOUR POLICY CAREFULLY

This Policy is a legal contract between the Owner and the Columbian Life Insurance Company. This Policy sets forth, in detail, the rights and obligations of the Owner and Columbian Life Insurance Company.

#### NOTICE OF THIRTY DAY RIGHT TO EXAMINE POLICY

If this Policy is unsatisfactory, the Owner may return it within thirty (30) days after receiving it. The Policy should be returned to the Company, the Agent through whom it was purchased, or any Agent of the Company; then all premiums paid will be refunded and the Policy will be deemed void from the beginning.

DANIEL J. FISCHER Secretary

Danily Lank

THOMAS E. RATTMANN Chairman, President and Chief Executive Officer

Thomas & Ratton

SYRACUSE, NY 13201-1056

WHOLE LIFE INSURANCE POLICY

AMOUNT OF INSURANCE PAYABLE AT DEATH
PREMIUMS ARE PAYABLE AS SHOWN ON PAGE 3
GUARANTEED CASH AND LOAN VALUES
PARTICIPATING – DIVIDENDS ARE DETERMINED EACH YEAR

FORM NO. 1F149-CL Page 1

#### **ALPHABETIC GUIDE TO POLICY PROVISIONS**

	PAGE
ASSIGNMENT	9
BASIS OF VALUES	7
BENEFICIARY	5
CASH SURRENDER	7
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ENTIRE CONTRACT	5
GENERAL PROVISIONS	9
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RIGHT TO EXAMINE POLICY	1
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TABLE OF GUARANTEED VALUES	
TERMINATION	9

INSURED: [JOHN DOE] POLICY NUMBER: [SPECIMEN]

SEX: [MALE] EFFECTIVE DATE: [JANUARY 1, 2008] INSURANCE AGE: [ 35] DATE OF ISSUE: [JANUARY 1, 2008]

POLICY CLASS: [PREFERRED NON-TOBACCO] REINSTATEMENT INT RATE: 6.00% ANNUALLY

AMOUNT OF INSURANCE: [\$100,000]

ADJUSTABLE POLICY LOAN INTEREST RATE: [6.00]% ANNUALLY

#### WHOLE LIFE INSURANCE POLICY

AMOUNT OF INSURANCE PAYABLE AT DEATH
PREMIUMS ARE PAYABLE AS SHOWN ON PAGE 3
GUARANTEED CASH AND LOAN VALUES
PARTICIPATING – DIVIDENDS ARE DETERMINED EACH YEAR

#### SCHEDULE OF BENEFITS AND PREMIUMS FOR:

POLICY NUMBER: [SPECIMEN] INSURANCE AGE: [35]

\*\*\*\* BENEFIT INFORMATION \*\*\*\*

BENEFIT	AMOUNT OF INSURANCE	BENEFIT PERIOD	ANNUAL	PAYABLE	FORM
DESCRIPTION		ENDS/MATURES	PREMIUM	FOR	NUMBER
LIFE PAID UP AT 90 [PREFERRED NON-TOBACCO	[\$100,000] D]	[JAN 01, 2094]	[\$1,615.00]	[55] YRS	1F149-CL

# \*\*\*\* TOTAL MODAL PREMIUMS \*\*\*\* MODE OF PAYMENT ELECTED: [ANNUAL]

	ΑT				
<b>BEGINNING ON</b>	AGE	ANNUAL	SEMI-ANNUAL	QUARTERLY	MONTHLY EFT
[JAN 01, 2008	35	1,615.00	839.80	427.98	140.51
JAN 01. 2063	PREMIU	MS CEASE1			

ENDORSEMENTS: [ ]

FORM NO. 1F149-CL

PAGE 3-1 [SPECIMEN] **ENDORSEMENTS:** 

POLICY NUMBER: [SPECIMEN] INSURANCE AGE: [35]

FORM NO. DESCRIPTION

[ ]

THESE ENDORSEMENTS ARE A PART OF THE POLICY TO WHICH THEY ARE ATTACHED. THEY ARE SUBJECT TO ALL THE POLICY PROVISIONS WHICH ARE CONSISTENT WITH THESE ENDORSEMENTS; IF INCONSISTENCIES OCCUR, THE PROVISIONS OF THESE ENDORSEMENTS WILL APPLY.

FORM NO. 1F149-CL

PAGE 3-2 [SPECIMEN]

#### **TABLE OF GUARANTEED VALUES**

POLICY NUMBER: [SPECIMEN] AMOUNT OF INSURANCE [\$100,000]
SEX: [ MALE] LIFE PAID UP AT 90 [ PREFERRED NON-TOBACCO]

**INSURANCE AGE: [35]** 

IF ALL PREMIUMS DUE HAVE BEEN PAID, THE GUARANTEED VALUES WILL BE:

END OF POLICY YEAR	ON [JAN 01,]	CASH OR LOAN VALUES	REDUCED PAID-UP INSURANCE	[\$100,000] EXTENDED TERM INSURANCE EXPIRES ON
1	[2009	\$ 0.00	\$ 0	
2	2010	0.00	0	
2 3	2011	679.00	3,000	Dec 07, 2015
4	2012	1,716.00	7,400	Feb 22, 2022
5	2013	2,789.00	11,500	Jan 20, 2027
6	2014	3,895.00	15,500	Aug 23, 2030
7	2015	5,035.00	19,400	Aug 01, 2033
8 9	2016	6,208.00	23,100	Jan 21, 2036
	2017	7,412.00	26,600	Feb 04, 2038
10	2018	8,648.00	30,000	Nov 14, 2039
11	2019	9,915.00	33,300	Jul 08, 2041
12	2020	11,215.00	36,400	Jan 14, 2043
13	2021	12,555.00	39,400	May 26, 2044
14	2022	13,939.00	42,400	Aug 28, 2045
15	2023	15,367.00	45,200	Oct 25, 2046
16	2024	16,835.00	47,900	Nov 23, 2047
17	2025	18,342.00	50,500	Nov 27, 2048
18	2026	19,883.00	53,000	Nov 10, 2049
19	2027	21,458.00	55,400	Oct 04, 2050
20	2028	23,058.00	57,700	Aug 10, 2051
AT AGE				
60	2033	31,480.00	67,700	Apr 06, 2055
62	2035	35,038.00	71,100	Jul 19, 2056
65	2038	40,448.00	75,700	May 03, 2058]

INTEREST RATE FOR BASIS OF VALUES: 4.00 % ANNUALLY

ANNUAL VALUE FACTOR PER \$1,000 OF AMOUNT OF INSURANCE: [10.97115] ANNUALLY

ANY PAID-UP ADDITIONS, DIVIDEND ACCUMULATIONS OR DIVIDENDS DUE AND UNPAID WILL INCREASE THE ABOVE VALUES. ANY POLICY LOAN AND LOAN INTEREST WILL DECREASE THE ABOVE VALUES.

VALUES FOR DATES NOT SHOWN ABOVE WILL BE FURNISHED UPON REQUEST.

#### **DEFINITIONS**

YOU and YOUR means the Owner of this Policy.

WE, OUR and US means Columbian Life Insurance Company.

The INSURED means the individual named as the Insured in this Policy. The Insured may or may not be the Owner.

POLICY ANNIVERSARY means the same date in each succeeding year as the Effective Date.

INSURANCE AGE, shown in the Policy Specifications Pages, means the age of the Insured on his or her last birthday.

#### **ENTIRE CONTRACT**

This Policy, including any attached riders, endorsements and the application, including any supplemental applications, is the entire contract. All statements made in the application are assumed to be representations and not warranties. No statement will be used to contest this Policy or defend against a claim unless it is contained in the application or a supplemental application.

This Policy may be subject to laws that will change its provisions. Any changes to this Policy must be in writing and agreed to by both the Owner and one of Our Officers. This Policy will be endorsed to reflect any change.

#### LIFE INSURANCE BENEFITS

The benefits payable at the death of the Insured will be the sum of:

- (A) The amount of insurance then in force; and
- (B) Any insurance on the life of the Insured provided by benefit riders; and
- (C) Any additional insurance provided by Paid-Up Additions; and
- (D) The accumulated value of any Dividends left at interest; and
- (E) Any Dividend at Death; and
- (F) Termination Dividend if applicable; and
- (G) The portion of any premium actually paid, and that has not been waived under any waiver of premium rider, that applies to a period beyond the Policy month in which the Insured dies.

#### LESS:

- (A) Any Policy Loan and loan interest to the date of death; and
- (B) The part of any unpaid premium that applies to the Grace Period provided the Insured dies within the Grace Period.

**OWNER.** The Insured is the Owner of this Policy unless another person is named as Owner on the application. If the Owner is not the Insured, and dies before the Insured, all rights of ownership will belong to the Owner's estate unless otherwise provided.

The Owner may be changed by proper written notice sent to Us. When We record the change of ownership, it will be effective from the date the notice was signed. We are not responsible for any action We take before We record the notice.

Unless the Policy states otherwise, the Owner can exercise all rights under it. These include the right to change the Beneficiary, assign the policy and change the Owner. All living Owners must act together with respect to this Policy.

**BENEFICIARY.** One or more persons may be named as Beneficiary on the application. Unless otherwise stated, all Beneficiaries will share equally in the amounts payable. The Life Insurance Benefits payable to any Beneficiary who dies before the Insured will be paid to any remaining Beneficiaries.

A Secondary Beneficiary may be named to take the place of a Beneficiary who dies while the Insured is living. If no Beneficiary is alive on the date the Insured dies, the Owner or the Owner's estate will be the Beneficiary, unless otherwise provided.

The Beneficiary may be changed by proper written notice to Us, unless the Beneficiary has been designated as irrevocable, in which case the written consent of the irrevocable beneficiary is also required. When We record the notice, the change of Beneficiary will be effective from the date the notice was signed. We are not responsible for any action We take before We record the notice.

**FILING OF A DEATH CLAIM.** Claim to the Life Insurance Benefits is made by filing a claim form with Us at Our Administrative Service Office and giving Us satisfactory proof of the Insured's death. The Life Insurance Benefits will be paid in one lump sum to the Beneficiary. Interest will be paid on the Life Insurance Benefits from the date of death to the date of payment at a rate not less than required by state law.

#### INCONTESTABILITY

We may not contest this Policy after it has been in force during the Insured's lifetime for two (2) years after the Date of Issue except for nonpayment of premium. A reinstatement of coverage will be incontestable after it has been in force during the Insured's lifetime for two (2) years from the date of reinstatement. Any contest concerning reinstated coverage will be based on the answers in the written application for reinstatement.

#### MISSTATEMENT OF AGE OR SEX

If the Insured's age or sex has been misstated, We will adjust the amount payable. The adjustment will be based on the amount which the premiums would have purchased at the correct age or sex.

#### SUICIDE

If the Insured commits suicide, while sane or insane, within two (2) years from the Date of Issue and while this Policy is in force, the amount We pay will be limited to a refund of all premiums paid that have not been waived under any waiver of premium rider LESS: (A) dividends paid in cash or used to pay premiums; and (B) any Policy Loan and loan interest to the date of death.

#### **PREMIUMS**

Premiums are payable for the number of years shown on Page 3. The premium amount and payment frequencies are shown on Page 3. Payment is due in advance on the first day of each payment period, starting on the Effective Date.

#### **GRACE PERIOD**

We allow a Grace Period for paying each premium except the first. If a premium has not been paid by its due date, the Policy will stay in force for thirty-one (31) days. If death occurs during the Grace Period, the premium due and unpaid will be deducted from the Life Insurance Benefits.

**OPTIONS WHEN POLICY LAPSES.** If a premium is not paid by the end of the Grace Period, this Policy will lapse. All insurance will end when the Policy lapses, unless it has a Surrender Value. If there is a Surrender Value, You may choose one of the options described in the Nonforfeiture Options Provision. You must choose an option within sixty (60) days after the premium due date. If no option is elected, We will continue coverage under the Extended Term Insurance option when this option is available. If Extended Term Insurance is not available, We will continue coverage under Paid-Up Insurance.

NONFORFEITURE OPTIONS. You may choose one of the following options provided the Insured is then living.

- (A) **Paid-Up Insurance.** You may continue this Policy as Paid-Up insurance. The amount of Paid-Up insurance is determined by applying the Surrender Value as a single premium based on the Insured's sex, tobacco class, and current age. The terms of this Policy will continue to apply.
- (B) **Extended Term Insurance.** You may continue this Policy as Extended Term Insurance if this Policy is in a Preferred or Standard Policy Class as stated on Page 2. The new amount of insurance will be the amount of insurance stated on Page 4 of this Policy; PLUS the face amount of any Paid-Up Additions or the accumulated value of any Dividends left on accumulation; LESS any Policy Loan and Interest at the Policy Loan Interest Rate in effect at the time the Policy lapses. The Extended Term Insurance will continue in force for as long as the Surrender Value will provide.

(C) **Surrender For Cash.** You can take the Surrender Value in cash. We have the right to delay a cash surrender for up to six (6) months. If payment of a cash surrender is deferred thirty (30) days or more, interest will be paid by the Company for the time of deferment at a rate not less than the minimum interest rate required by state law.

#### REINSTATEMENT

This Policy may be reinstated at any time within five (5) years after the premium default, unless it has been surrendered for cash. To do so, You must:

- (A) Give proof of insurability satisfactory to Us; and
- (B) Pay all unpaid premiums with interest at the Reinstatement Interest Rate stated on Page 2; and
- (C) Pay or reinstate any Policy Loan and loan interest.

#### **CASH SURRENDER**

You may surrender this Policy for cash at any time. This is done by giving Us written notice and returning this Policy to Us. If You do so, a Surrender Value is determined. We have the right to delay payment of a cash surrender for up to six (6) months. If payment of a cash surrender is deferred thirty (30) days or more, interest will be paid by the Company for the time of deferment at a rate not less than the minimum interest rate required by state law.

#### **SURRENDER VALUE.** The Surrender Value of this Policy is:

- (A) The portion of any premium paid that applies to a period beyond the Policy month of surrender; plus
- (B) The cash value of this Policy, as stated on Page 4, adjusted to the surrender date; plus
- (C) The cash value of any Riders attached to this Policy, adjusted to the surrender date; plus
- (D) The accumulated value of any Dividends left on accumulation; plus
- (E) The cash value of any Paid-Up Additions; plus
- (F) Termination Dividend if applicable.

#### LESS:

- (A) Any Policy Loan with interest at the Policy Loan Interest Rate; and
- (B) Any unpaid premium.

#### **BASIS OF VALUES**

The guaranteed values of this Policy are shown on Page 4. The values shown apply at the end of the Policy year if there is no unpaid Policy Loan. Values for any time other than the end of the year will be adjusted proportionately. The guaranteed cash value on any date within a Policy year will allow for the time elapsed in that year and the date to which premiums have been paid. Values for any year not shown will be calculated on the same basis as for those shown and will be furnished upon request.

The Cash Values, Paid-Up Insurance and Extended Term Insurance, present values, value factors and net single premiums referred to in this Policy are based on the Commissioners' 2001 Standard Ordinary Ultimate Mortality Table with gender and smoking distinction. Our computations assume the age of the Insured at his or her last birthday and interest at the rate stated in the Table of Guaranteed Values. They are calculated in accordance with the Standard Nonforfeiture Law. The values are at least as great as those required by law in the state in which this Policy is delivered. The guaranteed cash value at the end of any Policy year is the net single premium for the future guaranteed Life Insurance Benefits of the Policy less the present value of the value factors for all future Policy years in which premiums are payable. The value factors are shown in the Table of Guaranteed Values. The cash value can never be less than zero. We have filed a statement of the method used to compute those values with the Insurance Department in the State in which the Policy is delivered. If this Policy is being continued as Paid-Up insurance or Extended Term Insurance, the guaranteed cash value is the net single premium for the future guaranteed benefits of this Insurance. For thirty (30) days after each anniversary, this value will not be less than on the anniversary.

The cash value of any Paid-Up Additions is the net single premiums for future benefits of such additions. This cash value will never be less than the dividends used to purchase the Paid-Up Additions.

#### LOANS

You may obtain a loan from Us under the conditions which follow:

- (A) You assign a portion of the death proceeds equal to the outstanding loan balance to Us.
- (B) We may defer payment for up to six (6) months unless the loan is to pay premiums on policies with Us.

**LOAN VALUE.** The most You can borrow is the Surrender Value on the loan date; LESS: 1) loan interest to the next Policy Anniversary; and 2) any Termination Dividend.

**LOAN INTEREST.** Loan interest at an adjustable rate will be determined by Us annually as of the Policy Anniversary. It will apply during a policy year to new or outstanding loans, including a loan continued after any reinstatement of the Policy. Loan interest will be payable on each Policy Anniversary. This interest will accrue from day to day between anniversaries. Any interest not paid when due will be added to the loan and bear interest at the applicable loan interest rate.

The maximum loan interest rate allowed by law is (A) or (B), whichever is larger:

- (A) The Monthly Average of the Composite Yield on Seasoned Corporate Bonds as published by Moody's Investors Service, Inc., for the calendar month ending two months before the date as of which the loan interest rate is determined:
- (B) The rate used to compute the cash surrender values under the Policy during the applicable period plus one percent per annum.

If the above Average is no longer published, this will happen. A rate will be used in its place which is set by law or by regulation of the insurance supervisory official of the state in which this Policy is delivered. The loan interest rate determined for a policy anniversary will be affected by the maximum rate allowed by law for that anniversary in this way:

- (A) If the maximum rate is ½% or more, lower than the previous loan interest rate, that previous rate will be decreased on the Policy Anniversary so it is equal to or less than the maximum rate.
- (B) If the maximum rate is ½% or more, higher than the previous loan interest rate, that previous rate may be increased on the Policy Anniversary. But, it may not be higher than the maximum rate.

We will give written notice of the initial rate of interest applicable to a cash loan when the loan is made. We will give written notice of the initial rate of interest applicable to an automatic premium loan as soon as it is reasonably practical to do so after making the loan.

When several automatic premium loans are made in the same policy year the interest applicable to the first such loan will apply to the remaining loans in that year. And, no notices about those loans will be given.

If a loan interest rate is to be changed on a Policy Anniversary we will send written notice of the new rate at least thirty-one (31) days before the anniversary. Written notice from Us means notice mailed to the last known address of the Owner and of any assignee of record.

**LOAN REPAYMENT.** You may repay all or part of a loan at any time this Policy is in force. Any loan or loan interest not repaid will be deducted from the proceeds payable on death, maturity, or surrender.

Whenever the loan amount, with interest, is more than the most You can borrow as referenced above, Your Policy will terminate thirty-one (31) days after We have mailed notice to the last known address of the Owner and any assignees of record.

#### **AUTOMATIC PREMIUM LOAN**

If this benefit is in effect and the Company is holding Dividend Accumulations, and the premium is not paid before the end of the Grace Period, the dividends will be withdrawn and used to pay the overdue premium.

If the Company is not holding Dividend Accumulations, or the Dividend Accumulations are not large enough to pay the regular modal premium, a loan will be made from the Cash Value to pay premiums that are not paid before the end of the Grace Period. The Loan provisions apply to the loan and interest which will be charged from the overdue premium due date. If the loan value is not enough to pay the overdue premium, we will use the loan value to pay the next smaller method of premium payment that it will cover. If the loan value is not enough to pay a monthly premium, this Policy will lapse. The Options When Policy Lapses provision of the policy will apply if a loan cannot be made for payment of the premium.

Page 8 (1228)

The Automatic Premium Loan benefit may be elected in the application for the Policy. It may be elected later by sending a written request to Us. The benefit will be in effect for premiums due after the request is received in our Administrative Service Office during the Grace Period for that premium. This benefit may be cancelled at any time. The cancellation will apply to premiums due after the date we receive a written notice of cancellation at our Administrative Service Office.

#### **GENERAL PROVISIONS**

**ASSIGNMENT.** You may assign the proceeds of this Policy. The rights of the Beneficiary become subject to that assignment. We are not bound by any assignment unless it is received in written form at Our Administrative Service Office. If there is already an assignment on record, We will require You to confirm the change in assignment. We assume no responsibility for the validity of any assignment.

**PARTICIPATING.** This Policy is Participating. Each year we will determine how much surplus should be paid to our Owners as Dividends. We will then determine whether Dividends are payable on this Policy. Any Dividend payable at the end of the first Policy Year will be payable only after full payment of the premium for the second Policy Year. Thereafter, any Dividend will be payable on the Policy Anniversary if premiums have been paid to that anniversary.

The Owner may elect any of the following:

- (A) **Cash**. That Dividends be paid in cash;
- (B) **Premium Reduction**. That Dividends be used toward the payment of premiums. Any balance of the premium due must be paid. If any dividend exceeds the amount of premium due, the excess will be paid in cash to the Owner:
- (C) **Dividend Accumulations**. That the Company keep the Dividends and pay interest on them on each Policy Anniversary at not less than two percent (2%) per year, compounded annually; or
- (D) **Paid-Up Additions**. That Dividends be used to purchase additional insurance. The additional insurance will not require any future premiums and dividends may be paid on this insurance.

Dividends will be used to purchase Paid-Up Additions unless another option has been elected.

The Owner may withdraw any Dividend Accumulations and the cash value of any Paid-Up Additions at any time for their current value.

**Dividend At Death.** If we have determined that a Dividend would be payable at the next Policy Anniversary date after the Insured's death, we will pay a Dividend for that part of the Policy Year during which the Policy was in force.

**Termination Dividend.** When your Policy terminates, we may pay an additional Dividend in cash. It is not expected that a Termination Dividend will be available on this Policy before its fifteenth (15<sup>th</sup>) Policy Anniversary date.

**TERMINATION.** All privileges and rights of the Owner under this Policy and any accompanying riders terminate when any of the following events occur:

- (A) You surrender Your Policy for cash:
- (B) The Policy lapses because the loan amount, with interest, exceeds the most You could borrow;
- (C) The date this Policy matures as shown on the Policy Specifications Page is reached. In this case, We will pay the Surrender Value:
- (D) The Policy lapses, after the end of the Grace Period, because of nonpayment of premium; or
- (E) The Insured dies.



HOME OFFICE: ADMINISTRATIVE SERVICE OFFICE: CHICAGO, IL 960 JAMES STREET PO BOX 1056

SYRACUSE, NY 13201-1056

#### WHOLE LIFE INSURANCE POLICY

AMOUNT OF INSURANCE PAYABLE AT DEATH
PREMIUMS ARE PAYABLE AS SHOWN ON PAGE 3
GUARANTEED CASH AND LOAN VALUES
PARTICIPATING – DIVIDENDS ARE DETERMINED EACH YEAR

HOME OFFICE: CHICAGO, IL [ADMINISTRATIVE SERVICE OFFICE: SYRACUSE, NY]

#### **UNISEX ENDORSEMENT**

The first sentence in the second paragraph of the Basis of Values provision of this Policy is amended as follows:

The reference to "gender and" is deleted and the sentence, "Unisex issues are based on a blend of 60% male and 40% female." is added.

If any riders attached to this Policy contain a Rider Values provision, the first sentence in the first paragraph of the provision is amended as follows:

The reference to "gender and" is deleted and the sentence, "Unisex issues are based on a blend of 60% male and 40% female." is added.

DANIEL J. FISCHER Secretary THOMAS E. RATTMANN Chairman, President And Chief Executive Officer

Homes & Rathon

THIS ENDORSEMENT IS A PART OF THE POLICY TO WHICH IT IS ATTACHED. IT IS SUBJECT TO ALL THE POLICY PROVISIONS WHICH ARE CONSISTENT WITH THE ENDORSEMENT. IF INCONSISTENCIES OCCUR, THE PROVISIONS OF THIS ENDORSEMENT WILL APPLY.

HOME OFFICE: CHICAGO, IL ADMINISTRATIVE SERVICE OFFICE: [SYRACUSE, NY]

#### TEN YEAR RENEWABLE LEVEL TERM RIDER

#### **BENEFIT**

We will pay to the Beneficiary the amount of term insurance in effect under this Rider at the Insured's death, upon receiving proof that the Insured died before this Rider's Term Expiry Date. This Rider's Term Expiry Date is the Initial Term Expiry Date unless this Rider is renewed. If it is renewed as a Level Term under Option A below, the Term Expiry Date is the tenth policy anniversary after the latest renewal, but not later than the policy anniversary nearest the Insured's 70<sup>th</sup> birthday. If it is renewed with the Decreasing Death Benefit under Option B below, the Term Expiry Date is the policy anniversary nearest the Insured's 70<sup>th</sup> birthday.

The Policy Specifications Pages show the amount of term insurance on the Insured, this Rider's Initial Term Expiry Date and the premiums for this benefit.

#### **PREMIUMS**

There are two sets of premiums for this Rider shown on the Policy Specifications Pages: Current Premiums and Guaranteed Maximum Renewal Premiums. The premiums for the first ten policy years will be determined from the Current Premium Schedule. After premiums have been paid for ten years, we may change the annual premium for any subsequent policy year. The new premium may be less than or greater than the premium under the Current Premium Schedule. It will never exceed the premium shown in the Guaranteed Maximum Premium Schedule.

The renewal premiums are adjustable but will never exceed the premium shown on the Guaranteed Maximum Premium Schedule for that year.

Any premium change will be:

- Guaranteed for one year;
- Based on our future expectations as to mortality, expenses, interest and persistency;
- On a uniform basis for Insureds of the same insurance age, sex, tobacco status and class; and
- For those Insureds whose coverage has been in force for the same length of time.

Premiums will be reviewed annually by the Company. Any change in premium will be determined in accordance with the procedure on file with the Insurance Department of the state in which this policy has been delivered and will not be the result of deterioration of health.

Written notice of the premium change will be given prior to the time any change takes effect.

The portion of any premium paid which applies to a period beyond the date of death will be refunded. If the Insured dies during the 31-day grace period of an unpaid premium, we will deduct from the death proceeds that portion of the overdue premium to the date of death.

#### **TERM OF RIDER**

The Rider Term Period ends on the Rider's Term Expiry Date. Without proof of insurability, this Rider may be renewed on the Rider's Term Expiry Date by choosing either of the two renewal options listed below. At the end of each ten year term period under Option A, prior to age 70, you may choose to renew under either Option; however, once Option B is chosen, Option A is no longer available.

Form No. 1H813-CL Page 1

**OPTION A: 10 Year Renewable Level Term.** The renewed 10 Year Renewable Level Term Rider will be for the same face amount of insurance as shown on the Policy Specification Pages. You may choose this option by notifying Us sixty (60) days prior to the renewal date. The Policy and this Rider must be in force at the time of renewal. Premiums to be paid when you renew are shown on the Policy Specification Pages. If a 10 year term period ends after the Insured reaches age 60, this Rider may be renewed for a final period that ends when the Insured reaches age 70.

**OPTION B:** Decreasing Term. Renewal of this Rider as a Decreasing Term at the end of the initial 10 year term period will be automatic if you continue to pay premiums in accordance with the premium schedule for the initial ten year term period, adjustable annually never to exceed the Guaranteed Maximum Renewal Premium for that Term period, as determined by Us in accordance with the Premium provision, within the grace period. If Option B is chosen at the end of a subsequent ten year term period under Option A, the premium due will be in accordance with the premium schedule for the term immediately preceding the change in options, adjusted annually as set forth in the Premium Provision. The premium paying period will be to age 70 of the Insured and will provide for a decreasing death benefit. The amount of term insurance in this Rider will decrease annually on each policy anniversary date. A new Table of Decreasing Term life Insurance Amounts will be issued at the time of such a change. The Decreasing Term Table on the Policy Specification Pages shows the decreasing amount of term insurance on the amount of term insurance initially purchased.

#### **EXCHANGE**

The term insurance provided by this Rider may be exchanged without evidence of insurability for a new policy on any permanent life plan available at the time of exchange. The exchange must take place while this Rider is in force and no later than the Insured's age 65. We need a completed application from you to make the exchange.

The amount of the new policy must meet our minimum amount requirements and may not be greater than the amount of term insurance in force through this Rider on the date of exchange. However, if this Rider has been renewed under Option B, then the exchange of this Rider will be limited to 80% of the decreasing term amount in force on the date of exchange.

The new policy will be in the same premium class as this Rider. Its premium rate will be based on the Insured's age on the date of exchange. The new Policy's Date of Issue will be the date of exchange which must be on a premium due date for this Rider.

Carry-Over of Insured Disability Premium Payment Benefit. The new Policy may contain this benefit for a premium without evidence of insurability, if it is in force in this Rider, available at the Insured's age on the exchange date, and if the Insured is not then disabled at the time the new policy begins. Other riders may be included in the new Policy if we agree to them.

#### **MISSTATEMENT OF AGE**

If the age of the Insured has been misstated, benefits will be based on the premiums actually paid and the correct age of the Insured.

#### **INCONTESTABILITY**

We may not contest a claim under this Rider after it has been in force during the Insured's lifetime for two (2) years after the Date of Issue.

A reinstatement of coverage under this Rider will be incontestable after it has been in force during the Insured's lifetime for two (2) years from the date of reinstatement. Any contest concerning reinstated coverage will be based on the answers written in the application for reinstatement.

#### **TERMINATION**

This Rider will terminate on the earliest of the following:

- 1. The date the Policy terminates for any reason other than the death of the Insured; or
- 2. The date Extended Term Insurance or Paid-Up Insurance becomes effective under the "Options When Policy Lapses" section of the Policy; or
- 3. The first Policy Anniversary on or after the Insured's 70th birthday; or
- 4. The date of the Policy Owner's written request to terminate this Rider is received at our Administrative Service Office; or
- 5. The date the Policy or this Rider lapse because of nonpayment of premium.

#### **GENERAL PROVISIONS**

This Rider is attached to and is part of the Policy. This Rider is subject to all of the statements of the Policy that apply to and are not in conflict with the statements of this Rider. The premium for this Rider is shown on the Policy Specification Pages. The Date of Issue of this Rider is the Date of Issue of the Policy shown on Page 2 unless another Date of Issue is shown on Page 3.

DANIEL J. FISCHER Secretary

Danily Jake

THOMAS E. RATTMANN
Chairman, President
And Chief Executive Officer

Thomas & Ratton

HOME OFFICE: CHICAGO, IL ADMINISTRATIVE SERVICE OFFICE: [SYRACUSE, NY]

#### OTHER INSURED TEN YEAR RENEWABLE LEVEL TERM RIDER

#### **OTHER INSURED**

Other Insured means each person so named in the application or applications for this Rider.

#### **BENEFIT**

We will pay to the Beneficiary the amount of term insurance in effect under this Rider at the Other Insured's death, upon receiving proof that the Other Insured died before this Rider's Term Expiry Date. This Rider's Term Expiry Date is the Initial Term Expiry Date unless this Rider is renewed. If it is renewed as a Level Term under Option A below, the Term Expiry Date is the tenth policy anniversary after the latest renewal, but not later than the policy anniversary nearest the Other Insured's 70<sup>th</sup> birthday. If it is renewed with the Decreasing Death Benefit under Option B below, the Term Expiry Date is the policy anniversary nearest the Other Insured's 70<sup>th</sup> birthday.

The Policy Specification Pages show the amount of term insurance on the Other Insured, this Rider's Initial Term Expiry Date and the premiums for this benefit.

#### **PREMIUMS**

There are two sets of premiums for this Rider shown on the Policy Specification Pages: Current Premiums and Guaranteed Maximum Renewal Premiums. The premiums for the first ten policy years will be determined from the Current Premium Schedule. After premium have been paid for ten years, we may change the annual premium for any subsequent policy year. The new premium may be less than or greater than the premium under the Current Premium Schedule. It will never exceed the premium shown in the Guaranteed Maximum Premium Schedule.

The renewal premiums are adjustable but will never exceed the premium shown on the Guaranteed Maximum Premium Schedule for that year.

Any premium change will be:

- Guaranteed for one year;
- Based on our future expectations as to mortality, expenses, interest and persistency;
- On a uniform basis for Other Insureds of the same insurance age, sex, tobacco status and class; and
- For those Insureds whose coverage has been in force for the same length of time.

Premiums will be reviewed annually by the Company. Any change in premium will be determined in accordance with the procedure on file with the Insurance Department of the state in which this policy has been delivered and will not be the result of deterioration of health.

Written notice of the premium change will be given prior to the time any change takes effect.

The portion of any premium paid which applies to a period beyond the date of death will be refunded. If the Other Insured dies during the 31-day grace period of an unpaid premium, we will deduct from the death proceeds that portion of the overdue premium to the date of death.

Form No. 1H814-CL Page 1

#### **TERM OF RIDER**

The Rider Term Period ends on the Rider's Term Expiry Date. Without proof of insurability, this Rider may be renewed on the Rider's Term Expiry Date by choosing either of the two renewal options listed below. At the end of each ten year term period under Option A, prior to age 70, you may choose to renew under either Option; however, once Option B is chosen, Option A is no longer available.

**OPTION A:** 10 Year Renewable Level Term. The renewed 10 Year Renewable Level Term Rider will be for the same face amount of insurance as shown on the Policy Specification Pages. You may choose this option by notifying Us sixty (60) days prior to the renewal date. The Policy and this Rider must be in force at the time of renewal. Premiums to be paid when you renew are shown on the Policy Specification Pages. If a 10 year term period ends after an Other Insured reaches age 60, this Rider may be renewed for a final period that ends when the Other Insured reaches age 70.

**OPTION B:** Decreasing Term. Renewal of this Rider as a Decreasing Term at the end of the initial 10 year term period will be automatic if you continue to pay premiums in accordance with the premium schedule for the initial ten year term period, adjustable annually never to exceed the Guaranteed Maximum Renewal Premium for that Term period, as determined by Us in accordance with the Premium provision, within the grace period. If Option B is chosen at the end of a subsequent ten year term period under Option A, the premium due will be in accordance with the premium schedule for the term immediately preceding the change in options, adjusted annually as set forth in the Premium Provision. The premium paying period will be to age 70 of the Other Insured and will provide for a decreasing death benefit. The amount of term insurance in this Rider will decrease annually on each policy anniversary date. A new Table of Decreasing Term life Insurance Amounts will be issued at the time of such a change. The Decreasing Term Table on the Policy Specification Pages shows the decreasing amount of term insurance on the amount of term insurance initially purchased.

#### **EXCHANGE**

**Exchange Before Death.** The term insurance provided by this Rider may be exchanged without evidence of insurability for a new policy on any permanent life plan available at the time of exchange. The exchange must take place while this Rider is in force and no later than the Other Insured's 65th birthday. We need a completed application from you to make the exchange. The amount of the new policy must meet our minimum amount requirements and may not be greater than the amount of term insurance in force through this Rider on the date of exchange. However, if this Rider has been renewed under Option B, then the exchange of this Rider will be limited to 80% of the decreasing term amount in force on the date of exchange. The new policy will be in the same premium class as this Rider. Its premium rate will be based on the Other Insured's age on the date of exchange. The new policy's Date of Issue will be the date of exchange which must be on a premium due date for this Rider.

**Exchange After Death.** This exchange may be made if the Insured in this Policy dies before any Other Insured. In that event, any Other Insured may exchange this Rider for a new policy on any permanent life plan available at the time of exchange, in the full amount of this Rider.

This exchange must take place within 45 days of the Insured's death, during which time the Other Insured will remain insured for the Rider amount. The new policy's Date of Issue will be the Insured's date of death. All other requirements, as stated in the Exchange Before Death section above, apply to this exchange.

#### **MISSTATEMENT OF AGE**

If the age of the Other Insured has been misstated, benefits will be based on the premiums actually paid and the correct age of the Other Insured.

#### **INCONTESTABILITY**

We may not contest a claim under this Rider after it has been in force during the Other Insured's lifetime for two (2) years after the Date of Issue.

A reinstatement of coverage under this Rider will be incontestable after it has been in force during the Other Insured's lifetime for two (2) years from the date of reinstatement. Any contest concerning reinstated coverage will be based on the answers written in the application for reinstatement.

#### **TERMINATION**

This Rider will terminate on the earliest of the following:

- 1. The date the Policy terminates for any reason other than the death of the Insured; or
- 2. The date Extended Term Insurance or Paid-Up Insurance becomes effective under the "Options When Policy Lapses" section of the Policy; or
- 3. The first Policy Anniversary on or after the Other Insured's 70th birthday; or
- 4. The date of the Policy Owner's written request to terminate this Rider is received at our Administrative Service Office; or
- 5. The date the Policy or this Rider lapse because of nonpayment of premium.

#### **GENERAL PROVISIONS**

This Rider is attached to and is part of the Policy. This Rider is subject to all of the statements of the Policy that apply to and are not in conflict with the statements of this Rider. The premium for this Rider is shown on the Policy Specification Pages. The Date of Issue of this Rider is the Date of Issue of the Policy shown on Page 2 unless another Date of Issue is shown on Page 3.

DANIEL J. FISCHER Secretary THOMAS E. RATTMANN Chairman, President And Chief Executive Officer

Thomas & Rathram

HOME OFFICE: CHICAGO, IL ADMINISTRATIVE SERVICE OFFICE: [SYRACUSE, NY]

#### PAID UP ADDITIONS RIDER - SINGLE PREMIUM

#### **BENEFIT**

This Single Premium Whole Life Rider provides permanent life insurance coverage as long as this Rider and this Policy are in force. We will pay to the Beneficiary the Single Premium Whole Life Benefit shown in the Policy Specifications Pages when we receive satisfactory proof that the Insured died while this Rider was in force. This Rider has guaranteed values which are shown in the Policy Specifications Pages. These values do not reflect dividends or unpaid Policy Loans. This Rider is participating. See the Dividends section of the Policy for an explanation of dividend options which are extended to include the benefits under this Rider.

#### **CONSIDERATION**

This Rider is issued in consideration of:

- The application attached to it; and
- 2. The amount of single premium shown in the Policy Specifications Pages.

#### **PREMIUM**

The single premium for this Rider is due at our Administrative Service Office on the Rider Date of Issue. The single premium must be paid before the Rider is delivered to you.

#### **EXTENDED TERM INSURANCE**

While this Rider is in force, the Extended Term Insurance provision of the Policy is amended to include the Benefit amount of this Rider within the basic amount of insurance.

#### **RIDER VALUES**

The cash values for this Rider are based on the Commissioners 2001 Standard Ordinary Ultimate Mortality Table, age last birthday with gender distinction and smoking distinction. The interest rate is shown in the Policy Specifications Pages. The cash values are shown in the Policy Specifications Pages. If you discontinue paying premiums for the Policy then the cash value of this Rider will be included in the cash value of the Policy and will be disposed of according to the provisions of the Policy. Values for ages beyond those shown are equal to the present value of the death benefit based on the mortality table and interest rate.

You may obtain a loan whenever the Rider has a loan value as indicated in the Policy Specification Pages. Loans will be processed in accordance with the Policy provisions.

FORM NO. 1H815-CL Page 1

#### **TERMINATION**

This Rider will terminate on the earliest of the following:

- (a) The date the Policy terminates for any reason; or
- (b) The date of the Policy Owner's written request to terminate this Rider is received at our Administrative Service Office; or
- (c) The date the Policy lapses because of nonpayment of premium.

#### **GENERAL PROVISIONS**

This Rider is attached to and is part of the Policy. This Rider is subject to all of the statements of the Policy that apply to and are not in conflict with the statements of this Rider. The premium for this Rider is shown in the Policy Specifications Pages. The Date of Issue of this Rider is the Date of Issue of the Policy shown on Page 2 unless another Date of Issue is shown.

DANIEL J. FISCHER Secretary THOMAS E. RATTMANN Chairman, President And Chief Executive Officer

Thomas & Rathram

HOME OFFICE: CHICAGO, IL ADMINISTRATIVE SERVICE OFFICE: [SYRACUSE, NY]

#### PAID UP ADDITIONS RIDER - INCREASING DEATH BENEFIT

#### **BENEFIT**

This is an Increasing Death Benefit Whole Life Insurance Rider. We will pay to the Beneficiary the death benefit shown in the Policy Specification Pages when we receive satisfactory proof that the Insured died while this Rider was in force. The death benefit shown in the Policy Specification Pages assumes you have paid the premiums for this Rider. Your benefits will not increase if you do not pay premiums for this Rider. This Rider has guaranteed values which are shown in the Policy Specification Pages. These values do not reflect dividends or unpaid Policy Loans. This Rider is participating. See the Dividends section of the Policy for an explanation of the dividend options which are extended to include the benefits under this Rider. The benefits of this Rider are guaranteed for as long as you continue to pay Rider premiums.

#### **CONSIDERATION**

This Rider is issued in consideration of:

- 1. The application attached to it; and
- The first premium shown in the Policy Specification Pages.

#### **PREMIUM**

This Rider may be attached to a new policy. It may be attached to an in-force Policy on its policy anniversary date. The first premium for this Rider must be paid before the Rider is delivered to you.

If the Rider is purchased at the time the Policy is issued, the Rider Date of Issue is the Policy Date of Issue. If the Rider is attached to an in-force Policy, the Rider Date of Issue will be the policy anniversary date. The Rider will be effective on its Date of Issue. Premium payments for this Rider must be made within 31 days from the premium due date.

#### **EXTENDED TERM INSURANCE**

While this Rider is in force, the Extended Term Insurance provision of the Policy is amended to include the Benefit amount of this Rider within the basic amount of insurance.

#### **RIDER VALUES**

The guaranteed Rider values are shown in the Policy Specification Pages. If you discontinue paying premiums for the Policy, then the cash value of this Rider will be included in the cash value of the Policy and will be disposed of according to the provisions of the Policy. If you discontinue paying premiums for this Rider, you may choose one of the options listed below within 60 days after lapse. If you do not choose, the automatic option is Paid-Up Insurance.

**Cash Surrender.** You can surrender the Rider by returning it to the Agent through whom it was purchased or to us in exchange for its cash value. We may delay payment up to six months. If we defer payment for more than thirty (30) days, we will pay at least 3% interest compounded annually on the cash surrender value. All insurance stops when the Owner submits a written request for surrender.

FORM NO. 1H816-CL Page 1

**Paid-Up Insurance.** You may continue this Rider for a reduced amount of insurance without further payment of premiums. This insurance is for the full Rider benefit period, which is up to age 121. The cash value will be used as a net single premium to buy the amount of insurance available at the Insured's current age on the date of the unpaid premium. This option is eligible for dividends and has cash and loan values.

The cash values for this Rider are based on the Commissioners 2001 Standard Ordinary Ultimate Mortality Table, age last birthday with gender and smoking distinction. The interest rate and nonforfeiture factor are shown in the Policy Specifications Pages. Values beyond the ages shown on the Policy Specification Pages are equal to the present value of the future death benefit less the present value of the future nonforfeiture factor for the premium payment period on the Mortality Table and interest rate.

You may obtain a loan whenever the Rider has a loan value as indicated on the Policy Specification Pages. Loans will be processed in accordance with the Policy provisions.

#### **EXCLUSION FROM PREMIUM WAIVER**

This Rider is not covered under any Waiver of Premium Rider attached to the Policy. If the Waiver of Premium Rider goes into effect for the Policy, premium payments on this Rider will cease unless the Insured chooses to pay the premiums. If the Insured does not choose to pay the premium, this Rider will continue as Paid-Up Insurance as described above.

#### **TERMINATION**

This Rider will terminate on the earliest of the following:

- (a) The date the Policy terminates for any reason; or
- (b) The date the Policy Owner's written request to terminate this Rider is received at our Administrative Service Office; or
- (c) The date the Policy or this Rider lapses because of nonpayment of premium.

#### **GENERAL PROVISIONS**

This Rider is attached to and is part of the Policy. This Rider is subject to all of the statements of the Policy that apply to and are not in conflict with the statements of this Rider. The premium for this Rider is shown on Page 3 of the Policy. The Date of Issue of this Rider is the Date of Issue of the Policy shown on Page 2 unless another Date of Issue is shown on Page 3.

DANIEL J. FISCHER Secretary

Danely Jake

THOMAS E. RATTMANN Chairman, President And Chief Executive Officer

Thomas & Rathren

Company Tracking Number:

TOI: L071 Individual Life - Whole Sub-TOI: L071.101 Fixed/Indeterminate Premium - Single Life

Product Name: 2001 CSO Flagship

Project Name/Number: /

### **Rate Information**

Rate data applies to filing.

Filing Method: Initial rate filing

**Rate Change Type:** 

**Overall Percentage of Last Rate Revision:** 

**Effective Date of Last Rate Revision:** 

Filing Method of Last Filing:

### **Company Rate Information**

Company Name:	Overall %	Overall % Rate	Written	# of Policy	Premium:	Maximum %	Minimum %
	Indicated	Impact:	Premium	Holders		Change (where	Change (where
	Change:		Change for	Affected for this		required):	required):
			this	Program:			
			Program:				
Columbian Life Insurar	nce %	%				%	%
Company							

Company Tracking Number:

TOI: L071 Individual Life - Whole Sub-TOI: L071.101 Fixed/Indeterminate Premium - Single

Life

Product Name: 2001 CSO Flagship

Project Name/Number:

### Rate/Rule Schedule

Review Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:*	Rate ActionInformation:	Attachments
	Flagship Rates	1F149-CL	New		Flagship Rates.pdf
	Flagship Rider Rates	1H813-CL, 1H814-CL, 1H815-CL, 1H816-CL	New		Flagship Rider Rates.pdf

# Columbian Financial Group Flagship Gross Premiums May 6, 2008

	Male Nor	n-tobacco l	Preferred	Male No	n-tobacco	Standard	M	lale Tobaco	co	Female N	on-tobacco	Preferred
Issue	100,000 -	250,000 -	1,000,000	100,000 -	250,000 -	1,000,000	100,000 -	250,000 -	1,000,000	100,000 -	250,000 -	1,000,000
Age	249,999	999,999	+	249,999	999,999	+	249,999	999,999	+	249,999	999,999	+
0				4.82	4.52	4.35						
1				4.96	4.66	4.49						
2				5.11	4.81	4.64						
3				5.28	4.98	4.81						
4				5.46	5.16	4.99						
5				5.65	5.35	5.18						
6				5.85	5.55	5.38						
7				6.05	5.75	5.58						
8				6.26	5.96	5.79						
9				6.49	6.19	6.02						
10				6.72		6.25						
11				6.96 7.21	6.66 6.91	6.49 6.74						
12 13				7.21	7.17	7.00						
13				7.47	7.17	7.00 7.26						
15				8.00	7.70	7.53						
16				8.24	7.70	7.77						
17				8.49	8.19	8.02						
18				8.75	8.45	8.28		9.60	9.43			
19				9.02	8.72	8.55						
20				9.30		8.83						
21				9.60	9.30	9.13		10.58				
22				9.91	9.61	9.44	11.24	10.94	10.77			
23				10.24	9.94	9.77	11.62	11.32	11.15			
24				10.59	10.29	10.12	12.02	11.72	11.55			
25	10.30	10.00	9.83	10.95	10.65	10.48	12.44	12.14	11.97	9.20	8.90	8.73
26	10.75	10.45	10.28	11.43	11.13	10.96	12.88	12.58	12.41	9.52	9.22	9.05
27	11.23	10.93	10.76	11.93	11.63	11.46			12.89	9.85	9.55	9.38
28	11.73	11.43	11.26	12.47	12.17	12.00	13.86	13.56	13.39	10.21	9.91	9.74

29	12.26	11.96	11.79	13.03	12.73	12.56	14.39	14.09	13.92	10.57	10.27	10.10
30	12.82	12.52	12.35	13.63	13.33	13.16	14.94	14.64	14.47	10.96	10.66	10.49
31	13.42	13.12	12.95	14.26	13.96	13.79	15.53	15.23	15.06	11.37	11.07	10.90
32	14.05	13.75	13.58	14.93	14.63	14.46	16.15	15.85	15.68	11.79	11.49	11.32
33	14.71	14.41	14.24	15.63	15.33	15.16	16.80	16.50	16.33	12.24	11.94	11.77
34	15.41	15.11	14.94	16.38	16.08	15.91	17.49	17.19	17.02	12.71	12.41	12.24
35	16.15	15.85	15.68	17.16	16.86	16.69	18.21	17.91	17.74	13.20	12.90	12.73
36	16.88	16.58	16.41	17.94	17.64	17.47	18.97	18.67	18.50	13.83	13.53	13.36
37	17.64	17.34	17.17	18.76	18.46	18.29	19.77	19.47	19.30	14.49	14.19	14.02
38	18.45	18.15	17.98	19.63	19.33	19.16	20.61	20.31	20.14	15.18	14.88	14.71
39	19.30	19.00	18.83	20.54	20.24	20.07	21.50	21.20	21.03	15.91	15.61	15.44
40	20.21	19.91	19.74	21.51	21.21	21.04	22.43	22.13	21.96	16.69	16.39	16.22
41	21.16	20.86	20.69	22.52	22.22	22.05	23.41	23.11	22.94	17.50	17.20	17.03
42	22.16	21.86	21.69	23.60	23.30	23.13	24.43	24.13	23.96	18.37	18.07	17.90
43	23.21	22.91	22.74	24.73	24.43	24.26	25.52	25.22	25.05	19.28	18.98	18.81
44	24.33	24.03	23.86	25.92	25.62	25.45	26.66	26.36	26.19	20.24	19.94	19.77
45	25.50	25.20	25.03	27.18	26.88	26.71	27.86	27.56	27.39	21.25	20.95	20.78
46	26.62	26.32	26.15	28.41	28.11	27.94	29.13	28.83	28.66	22.16	21.86	21.69
47	27.80	27.50	27.33	29.71	29.41	29.24	30.48	30.18	30.01	23.13	22.83	22.66
48	29.07	28.77	28.60	31.10	30.80	30.63	31.89	31.59	31.42	24.14	23.84	23.67
49	30.41	30.11	29.94	32.58	32.28	32.11	33.40	33.10	32.93	25.21	24.91	24.74
50	31.85	31.55	31.38	34.15	33.85	33.68	34.99	34.69	34.52	26.34	26.04	25.87
51	33.38	33.08	32.91	35.83	35.53	35.36	36.68	36.38	36.21	27.53	27.23	27.06
52	35.00	34.70	34.53	37.62	37.32	37.15	38.47	38.17	38.00	28.79	28.49	28.32
53	36.73	36.43	36.26	39.51	39.21	39.04	40.36	40.06	39.89	30.12	29.82	29.65
54	38.56	38.26	38.09	41.52	41.22	41.05	42.37	42.07	41.90	31.52	31.22	31.05
55	40.50	40.20	40.03	43.65	43.35	43.18	44.49	44.19	44.02	33.00	32.70	32.53
56	42.50	42.20	42.03	45.82	45.52	45.35	46.75	46.45	46.28	34.94	34.64	34.47
57	44.64	44.34	44.17	48.15	47.85	47.68	49.14	48.84	48.67	37.00	36.70	36.53
58	46.93	46.63	46.46	50.63	50.33	50.16	51.68	51.38	51.21	39.18	38.88	38.71
59	49.39	49.09	48.92	53.30	53.00	52.83	54.39	54.09	53.92	41.50	41.20	41.03
60	52.01	51.71	51.54	56.15	55.85	55.68	57.29	56.99	56.82	43.98	43.68	43.51
61	54.81	54.51	54.34	59.18	58.88	58.71	60.37	60.07	59.90	46.63	46.33	46.16
62	57.79	57.49	57.32	62.42	62.12	61.95	63.67	63.37	63.20	49.46	49.16	48.99
63	60.96	60.66	60.49	65.86	65.56	65.39	67.19	66.89	66.72	52.50	52.20	52.03
64	64.36	64.06	63.89	69.55	69.25	69.08	70.93	70.63	70.46	55.77	55.47	55.30
65	68.00	67.70	67.53	73.50	73.20	73.03	74.92	74.62	74.45	59.30	59.00	58.83

66	70.65	70.35	70.18	76.86	76.56	76.39	79.18	78.88	78.71	61.55	61.25	61.08
67	73.52	73.22	73.05	80.51	80.21	80.04	83.73	83.43	83.26	63.98	63.68	63.51
68	76.65	76.35	76.18	84.48	84.18	84.01	88.62	88.32	88.15	66.61	66.31	66.14
69	80.07	79.77	79.60	88.81	88.51	88.34	93.87	93.57	93.40	69.48	69.18	69.01
70	83.81	83.51	83.34	93.55	93.25	93.08	99.52	99.22	99.05	72.61	72.31	72.14
71	87.81	87.51	87.34	98.64	98.34	98.17	105.59	105.29	105.12	75.95	75.65	75.48
72	92.17	91.87	91.70	104.16	103.86	103.69	112.11	111.81	111.64	79.61	79.31	79.14
73	96.93	96.63	96.46	110.21	109.91	109.74	119.06	118.76	118.59	83.62	83.32	83.15
74	102.18	101.88	101.71	116.87	116.57	116.40	126.43	126.13	125.96	88.06	87.76	87.59
75	108.00	107.70	107.53	124.25	123.95	123.78	134.24	133.94	133.77	93.00	92.70	92.53
76	114.47	114.17	114.00	132.46	132.16	131.99	142.52	142.22	142.05	98.53	98.23	98.06
77	121.69	121.39	121.22	141.62	141.32	141.15	151.30	151.00	150.83	104.76	104.46	104.29
78	129.76	129.46	129.29	151.85	151.55	151.38	160.68	160.38	160.21	111.88	111.58	111.41
79	138.83	138.53	138.36	163.37	163.07	162.90	170.76	170.46	170.29	120.09	119.79	119.62
80	149.14	148.84	148.67	176.45	176.15	175.98	181.63	181.33	181.16	129.63	129.33	129.16

Notes: Male Tobacco users are equal to 4228 Max Premiums

Female N	on-tobacco	Standard	Fei	male Tobac	cco	Unisex Non-tobacco Preferred						
100,000 -	250,000 -	1,000,000	100,000 -	250,000 -	1,000,000	2,500 -	20,000 -	50,000 -	100,000 -	250,000 -	1,000,000	2,500 -
249,999	999,999	+	249,999	999,999	+	19,999	49,999	99,999	249,999	999,999	+	19,999
4.62	4.32	4.15										9.34
4.73		4.26										9.47
4.85	4.55	4.38										9.61
4.98		4.51										9.76
5.11		4.64										9.92
5.25		4.78										10.09
5.39		4.92										10.27
5.55		5.08										10.45
5.70		5.23										10.64
5.87		5.40										10.84
6.04		5.57										11.05
6.22		5.75										11.26
6.40		5.93										11.49
6.59		6.12										11.72
6.79		6.32										11.95
7.00		6.53										12.20
7.21	6.91	6.74										12.43
7.44		6.97										12.67
7.67		7.20			9.21							12.92
7.92		7.45			9.49							13.18
8.17		7.70			9.80							13.45
8.44		7.97	10.58		10.11							13.74
8.72		8.25		10.61	10.44							14.03
9.02		8.55			10.79							14.35
9.33		8.86			11.15							14.69
9.65		9.18			11.53	N/A	N/A	N/A	9.86			15.03
10.00		9.53			11.93	N/A	N/A	N/A	10.26			15.46
10.36		9.89			12.35		N/A	N/A	10.68			15.90
10.75	10.45	10.28	13.25	12.95	12.78	N/A	N/A	N/A	11.12	10.82	10.65	16.38

I	11.15	10.85	10.68	13.71	13.41	13.24	N/A	N/A	N/A	11.58	11.28	11.11	16.88
	11.57	11.27	11.10	14.20	13.90	13.73	N/A	N/A	N/A	12.08	11.78	11.61	17.41
	12.02	11.72	11.55	14.70	14.40	14.23	N/A	N/A	N/A	12.60	12.30	12.13	17.96
	12.48	12.18	12.01	15.24	14.94	14.77	N/A	N/A	N/A	13.15	12.85	12.68	18.55
	12.97	12.67	12.50	15.80	15.50	15.33	N/A	N/A	N/A	13.72	13.42	13.25	19.17
	13.48	13.18	13.01	16.38	16.08	15.91	N/A	N/A	N/A	14.33	14.03	13.86	19.82
	14.02	13.72	13.55	17.00	16.70	16.53	N/A	N/A	N/A	14.97	14.67	14.50	20.50
	14.71	14.41	14.24	17.66	17.36	17.19	N/A	N/A	N/A	15.66	15.36	15.19	21.25
	15.44	15.14	14.97	18.35	18.05	17.88	N/A	N/A	N/A	16.38	16.08	15.91	22.03
	16.20	15.90	15.73	19.08	18.78	18.61	N/A	N/A	N/A	17.14	16.84	16.67	22.86
	17.01	16.71	16.54	19.85	19.55	19.38	N/A	N/A	N/A	17.94	17.64	17.47	23.73
	17.87	17.57	17.40	20.67	20.37	20.20	N/A	N/A	N/A	18.80	18.50	18.33	24.65
	18.77	18.47	18.30	21.53	21.23	21.06	N/A	N/A	N/A	19.70	19.40	19.23	25.62
	19.72	19.42	19.25	22.44	22.14	21.97	N/A	N/A	N/A	20.64	20.34	20.17	26.65
	20.72	20.42	20.25	23.41	23.11	22.94	N/A	N/A	N/A	21.64	21.34	21.17	27.73
	21.78	21.48	21.31	24.42	24.12	23.95	N/A	N/A	N/A	22.69	22.39	22.22	28.86
	22.90	22.60	22.43	25.50	25.20	25.03	N/A	N/A	N/A	23.80	23.50	23.33	30.07
	23.94	23.64	23.47	26.85	26.55	26.38	N/A	N/A	N/A	24.84	24.54	24.37	31.22
	25.04	24.74	24.57	28.27	27.97	27.80	N/A	N/A	N/A	25.93	25.63	25.46	32.44
	26.20	25.90	25.73	29.76	29.46	29.29	N/A	N/A	N/A	27.10	26.80	26.63	33.74
	27.42	27.12	26.95	31.33	31.03	30.86	N/A	N/A	N/A	28.33	28.03	27.86	35.12
	28.71	28.41	28.24	32.97	32.67	32.50	N/A	N/A	N/A	29.65	29.35	29.18	36.57
	30.07	29.77	29.60	34.70	34.40	34.23	N/A	N/A	N/A	31.04	30.74	30.57	38.13
	31.50	31.20	31.03	36.51	36.21	36.04	N/A	N/A	N/A	32.52	32.22	32.05	39.77
	33.01	32.71	32.54	38.41	38.11	37.94	N/A	N/A	N/A	34.09	33.79	33.62	41.51
	34.61	34.31	34.14	40.40	40.10	39.93	N/A	N/A	N/A	35.74	35.44	35.27	43.36
	36.30	36.00	35.83	42.50	42.20	42.03	N/A	N/A	N/A	37.50	37.20	37.03	45.31
	38.34	38.04	37.87	44.73	44.43	44.26	N/A	N/A	N/A	39.48	39.18	39.01	47.43
	40.51	40.21	40.04	47.09	46.79	46.62	N/A	N/A	N/A	41.58	41.28	41.11	49.69
	42.81	42.51	42.34	49.58	49.28	49.11	N/A	N/A	N/A	43.83	43.53	43.36	52.10
	45.25	44.95	44.78	52.22	51.92	51.75	N/A	N/A	N/A	46.23	45.93	45.76	54.68
	47.86	47.56	47.39	55.01	54.71	54.54	N/A	N/A	N/A	48.80	48.50	48.33	57.43
	50.65	50.35	50.18	57.98	57.68	57.51	N/A	N/A	N/A	51.54	51.24	51.07	60.37
	53.64	53.34	53.17	61.14	60.84	60.67	N/A	N/A	N/A	54.46	54.16	53.99	63.51
	56.84	56.54	56.37	64.51	64.21	64.04	N/A	N/A	N/A	57.58	57.28	57.11	66.85
	60.29	59.99	59.82	68.13	67.83	67.66	N/A	N/A	N/A	60.92	60.62	60.45	70.45
1	64.00	63.70	63.53	72.00	71.70	71.53	N/A	N/A	N/A	64.52	64.22	64.05	74.30

I	66.51	66.21	66.04	75.35	75.05	74.88	N/A	N/A	N/A	67.01	66.71	66.54	77.32
	69.23	68.93	68.76	78.96	78.66	78.49	N/A	N/A	N/A	69.70	69.40	69.23	80.60
	72.18	71.88	71.71	82.85	82.55	82.38	N/A	N/A	N/A	72.63	72.33	72.16	84.16
	75.39	75.09	74.92	87.04	86.74	86.57	N/A	N/A	N/A	75.83	75.53	75.36	88.04
	78.89	78.59	78.42	91.57	91.27	91.10	N/A	N/A	N/A	79.33	79.03	78.86	92.29
	82.63	82.33	82.16	96.37	96.07	95.90	N/A	N/A	N/A	83.07	82.77	82.60	96.84
	86.72	86.42	86.25	101.54	101.24	101.07	N/A	N/A	N/A	87.15	86.85	86.68	101.78
	91.21	90.91	90.74	107.15	106.85	106.68	N/A	N/A	N/A	91.61	91.31	91.14	107.21
	96.18	95.88	95.71	113.27	112.97	112.80	N/A	N/A	N/A	96.53	96.23	96.06	113.19
	101.70	101.40	101.23	120.00	119.70	119.53	N/A	N/A	N/A	102.00	101.70	101.53	119.83
	107.88	107.58	107.41	127.45	127.15	126.98	N/A	N/A	N/A	108.09	107.79	107.62	127.23
	114.86	114.56	114.39	135.76	135.46	135.29	N/A	N/A	N/A	114.92	114.62	114.45	135.52
	122.82	122.52	122.35	145.14	144.84	144.67	N/A	N/A	N/A	122.61	122.31	122.14	144.84
	132.01	131.71	131.54	155.85	155.55	155.38	N/A	N/A	N/A	131.33	131.03	130.86	155.43
	142.68	142.38	142.21	168.10	167.80	167.63	N/A	N/A	N/A	141.34	141.04	140.87	167.54

Unis	sex Non-tob	oacco Stan	dard		Unisex Tobacco						
20,000 -	50,000 -	100,000 -	250,000 -	1,000,000	2,500 -	20,000 -	50,000 -	100,000 -	250,000 -	1,000,000	
49,999	99,999	249,999	999,999	+	19,999	49,999	99,999	249,999	999,999	+	
,	55,555	_ 10,000	,		,	10,000	,	::,:::			
6.34	5.34	4.74	4.44	4.27							
6.47		4.87	4.57	4.40							
6.61	5.61	5.01	4.71	4.54							
6.76	5.76	5.16	4.86	4.69							
6.92	5.92	5.32	5.02	4.85							
7.09	6.09	5.49	5.19	5.02							
7.27	6.27	5.67	5.37	5.20							
7.45	6.45	5.85	5.55	5.38							
7.64	6.64	6.04	5.74	5.57							
7.84	6.84	6.24	5.94	5.77							
8.05	7.05	6.45	6.15	5.98							
8.26	7.26	6.66	6.36	6.19							
8.49	7.49	6.89	6.59	6.42							
8.72	7.72	7.12	6.82	6.65							
8.95	7.95	7.35	7.05	6.88							
9.20	8.20	7.60	7.30	7.13							
9.43	8.43	7.83	7.53	7.36							
9.67	8.67	8.07	7.77	7.60							
9.92	8.92	8.32	8.02	7.85	14.41	11.41	10.41	9.81	9.51	9.34	
10.18	9.18	8.58	8.28	8.11	14.72	11.72	10.72	10.12	9.82	9.65	
10.45	9.45	8.85	8.55	8.38	15.03	12.03	11.03	10.43	10.13	9.96	
10.74	9.74	9.14	8.84	8.67	15.36	12.36	11.36	10.76	10.46	10.29	
11.03	10.03	9.43	9.13	8.96	15.71	12.71	11.71	11.11	10.81	10.64	
11.35	10.35	9.75	9.45	9.28	16.08	13.08	12.08	11.48	11.18	11.01	
11.69	10.69	10.09	9.79	9.62	16.46	13.46	12.46	11.86	11.56	11.39	
12.03	11.03	10.43	10.13	9.96	16.86	13.86	12.86	12.26	11.96	11.79	
12.46	11.46	10.86	10.56	10.39	17.29	14.29	13.29	12.69	12.39	12.22	
12.90	11.90	11.30	11.00	10.83	17.74	14.74	13.74	13.14	12.84	12.67	
13.38	12.38	11.78	11.48	11.31	18.22	15.22	14.22	13.62	13.32	13.15	

13.88	12.88	12.28	11.98	11.81	18.72	15.72	14.72	14.12	13.82	13.65
14.41	13.41	12.81	12.51	12.34	19.24	16.24	15.24	14.64	14.34	14.17
14.96	13.96	13.36	13.06	12.89	19.80	16.80	15.80	15.20	14.90	14.73
15.55	14.55	13.95	13.65	13.48	20.39	17.39	16.39	15.79	15.49	15.32
16.17	15.17	14.57	14.27	14.10	21.00	18.00	17.00	16.40	16.10	15.93
16.82	15.82	15.22	14.92	14.75	21.65	18.65	17.65	17.05	16.75	16.58
17.50	16.50	15.90	15.60	15.43	22.33	19.33	18.33	17.73	17.43	17.26
18.25	17.25	16.65	16.35	16.18	23.05	20.05	19.05	18.45	18.15	17.98
19.03	18.03	17.43	17.13	16.96	23.80	20.80	19.80	19.20	18.90	18.73
19.86	18.86	18.26	17.96	17.79	24.60	21.60	20.60	20.00	19.70	19.53
20.73	19.73	19.13	18.83	18.66	25.44	22.44	21.44	20.84	20.54	20.37
21.65	20.65	20.05	19.75	19.58	26.33	23.33	22.33	21.73	21.43	21.26
22.62	21.62	21.02	20.72	20.55	27.26	24.26	23.26	22.66	22.36	22.19
23.65	22.65	22.05	21.75	21.58	28.23	25.23	24.23	23.63	23.33	23.16
24.73	23.73	23.13	22.83	22.66	29.28	26.28	25.28	24.68	24.38	24.21
25.86	24.86	24.26	23.96	23.79	30.36	27.36	26.36	25.76	25.46	25.29
27.07	26.07	25.47	25.17	25.00	31.52	28.52	27.52	26.92	26.62	26.45
28.22	27.22	26.62	26.32	26.15	32.82	29.82	28.82	28.22	27.92	27.75
29.44	28.44	27.84	27.54	27.37	34.20	31.20	30.20	29.60	29.30	29.13
30.74	29.74	29.14	28.84	28.67	35.64	32.64	31.64	31.04	30.74	30.57
32.12	31.12	30.52	30.22	30.05	37.17	34.17	33.17	32.57	32.27	32.10
33.57	32.57	31.97	31.67	31.50	38.78	35.78	34.78	34.18	33.88	33.71
35.13	34.13	33.53	33.23	33.06	40.49	37.49	36.49	35.89	35.59	35.42
36.77	35.77	35.17	34.87	34.70	42.29	39.29	38.29	37.69	37.39	37.22
38.51	37.51	36.91	36.61	36.44	44.18	41.18	40.18	39.58	39.28	39.11
40.36	39.36	38.76	38.46	38.29	46.18	43.18	42.18	41.58	41.28	41.11
42.31	41.31	40.71	40.41	40.24	48.29	45.29	44.29	43.69	43.39	43.22
44.43	43.43	42.83	42.53	42.36	50.54	47.54	46.54	45.94	45.64	45.47
46.69	45.69	45.09	44.79	44.62	52.92	49.92	48.92	48.32	48.02	47.85
49.10	48.10	47.50	47.20	47.03	55.44	52.44	51.44	50.84	50.54	50.37
51.68	50.68	50.08	49.78	49.61	58.12	55.12	54.12	53.52	53.22	53.05
54.43	53.43	52.83	52.53	52.36	60.98	57.98	56.98	56.38	56.08	55.91
57.37	56.37	55.77	55.47	55.30	64.01	61.01	60.01	59.41	59.11	58.94
60.51	59.51	58.91	58.61	58.44	67.26	64.26	63.26	62.66	62.36	62.19
63.85	62.85	62.25	61.95	61.78	70.72	67.72	66.72	66.12	65.82	65.65
67.45	66.45	65.85	65.55	65.38	74.41	71.41	70.41	69.81	69.51	69.34
71.30	70.30	69.70	69.40	69.23	78.35	75.35	74.35	73.75	73.45	73.28
				=						=

74.32	73.32	72.72	72.42	72.25	82.25	79.25	78.25	77.65	77.35	77.18
77.60	76.60	76.00	75.70	75.53	86.42	83.42	82.42	81.82	81.52	81.35
81.16	80.16	79.56	79.26	79.09	90.91	87.91	86.91	86.31	86.01	85.84
85.04	84.04	83.44	83.14	82.97	95.74	92.74	91.74	91.14	90.84	90.67
89.29	88.29	87.69	87.39	87.22	100.94	97.94	96.94	96.34	96.04	95.87
93.84	92.84	92.24	91.94	91.77	106.50	103.50	102.50	101.90	101.60	101.43
98.78	97.78	97.18	96.88	96.71	112.48	109.48	108.48	107.88	107.58	107.41
104.21	103.21	102.61	102.31	102.14	118.90	115.90	114.90	114.30	114.00	113.83
110.19	109.19	108.59	108.29	108.12	125.77	122.77	121.77	121.17	120.87	120.70
116.83	115.83	115.23	114.93	114.76	133.14	130.14	129.14	128.54	128.24	128.07
124.23	123.23	122.63	122.33	122.16	141.09	138.09	137.09	136.49	136.19	136.02
132.52	131.52	130.92	130.62	130.45	149.68	146.68	145.68	145.08	144.78	144.61
141.84	140.84	140.24	139.94	139.77	159.06	156.06	155.06	154.46	154.16	153.99
152.43	151.43	150.83	150.53	150.36	169.40	166.40	165.40	164.80	164.50	164.33
164.54	163.54	162.94	162.64	162.47	180.82	177.82	176.82	176.22	175.92	175.75

Add Bands

### FLAGSHIP ADB

<u>Ages</u>	Premium/ 1000
0-35	0.90
36-40	0.95
41-45	1.00
46-50	1.10
51-55	1.20
56-60	1.35
61-65	1.55

Benefit expires at attained age 70

#### FLAGSHIP Waiver of Premium

<u>Ages</u>	% Premium
0-35	5.00%
36-40	6.00%
41-45	7.00%
46-50	8.00%
51-55	9.00%

% Premium applied to all other coverage premiums plus fee except for PUA riders. Benefit expires at attained age 60

#### FLAGSHIP CHILDRENS INSURANCE RIDER

INSURED AGE PREMS PER UNIT

18-55 5.00

#### Columbian Financial Group Renewable Level Term Rider Gross Premiums - Base May 16, 2008

	Male Pre	ferred Non-	Tobacco User	Male Star	ndard Non-1	Tobacco User	Male Tobacco User			
Age	Issue	Renewal	Guaranteed	Issue	Renewal	Guaranteed	Issue	Renewal	Guaranteed	
				-				-		
18				1.76			2.15			
19				1.76			2.23			
20				1.77			2.31			
21				1.77			2.39			
22				1.78			2.47			
23				1.78			2.56			
24				1.79			2.65			
25	1.37			1.79			2.75			
26	1.40			1.84			2.84			
27	1.44			1.90			2.94			
28	1.47			1.95	1.85	4.07	3.05	2.90	5.51	
29	1.51			2.01	1.91	4.20	3.15	2.99	5.68	
30	1.56			2.08	1.98	4.36	3.27	3.11	5.91	
31	1.60			2.15	2.04	4.49	3.40	3.23	6.14	
32	1.65			2.22	2.11	4.64	3.53	3.35	6.37	
33	1.70			2.30	2.19	4.82	3.67	3.49	6.63	
34	1.75			2.38	2.26	4.97	3.82	3.63	6.90	
35	1.81	1.72	4.47	2.47	2.34	5.15	3.98	3.78	7.18	
36	1.90	1.81	4.71	2.62	2.49	5.48	4.25	4.04	7.68	
37	2.00		4.94	2.77	2.63	5.79	4.54	4.31	8.19	
38	2.10		5.20	2.94	2.79	6.14	4.84	4.60	8.74	
39	2.21	2.10	5.46	3.11	2.95	6.49	5.16	4.90	9.31	
40	2.33	2.21	5.75	3.30	3.14	6.91	5.50	5.23	9.94	
41	2.45	2.33	6.06	3.49	3.32	7.30	5.85	5.56	10.56	
42	2.58	2.45	6.37	3.70	3.52	7.74	6.22	5.91	11.23	
43	2.71	2.57	6.68	3.91	3.71	8.16	6.61	6.28	11.93	
44	2.85		7.05	4.14	3.93	8.65	7.01	6.66	12.65	
45	3.00	2.85	7.41	4.37	4.15	9.13	7.43	7.06	13.42	
46	3.18		7.85	4.65	4.42	9.72	7.95	7.55	14.35	
47	3.36		8.29	4.94	4.69	10.32	8.49	8.07	15.33	
48	3.56		8.79	5.25	4.99	10.98	9.07	8.62	16.38	
49	3.77	3.58	9.31	5.59	5.31	11.68	9.69	9.21	17.50	
50	4.00	3.80	9.88	5.95	5.65	12.43	10.35	9.83	18.68	
51	4.25	4.04	10.50	6.33	6.01	13.22	11.06	10.51	19.97	
52	4.51	4.28	11.13	6.74	6.40	14.08	11.81	11.22	21.32	
53	4.78	4.54	11.80	7.17	6.81	14.98	12.60	11.97	22.74	
54	5.08	4.83	12.56	7.63	7.25	15.95	13.42	12.75	24.23	
55	5.38	5.11	13.29	8.11	7.70	16.94	14.27	13.56	25.76	
56	5.93		14.64	8.94	8.49	18.68	15.75	14.96	28.42	
57	6.54		16.15	9.84	9.35	20.57	17.37	16.50	31.35	
58	7.20		17.78	10.85	10.31	22.68	19.15	18.19	34.56	
59	7.94	7.54	19.60	11.96	11.36	24.99	21.13	20.07	38.13	
60	8.75	8.31	21.61	13.18	12.52		23.29	22.13	42.05	
61		9.16	23.82		13.80	30.36		24.41	46.38	
62		10.09	26.23		15.21	33.46		26.93	51.17	
63		11.12	28.91		16.77			29.70	56.43	
64		12.26	31.88		18.48			32.76	62.24	
65		13.51	35.13		20.37			36.13	68.65	
66		14.89	38.71		22.45			39.85	75.72	
67		16.41	42.67		24.75			43.95	83.51	
68		18.09	47.03		27.27			48.48	92.11	
69		19.93	51.82		30.06	66.13		53.47	101.59	

#### Columbian Financial Group Renewable Level Term Rider Gross Premiums - Base May 16, 2008

	Female Pr	eferred Non	-Tobacco User	Female St	andard Non-	Tobacco User	Female Tobacco User			
Age	Issue	Renewal	Guaranteed	Issue	Renewal	Guaranteed	Issue	Renewal	Guaranteed	
18				1.14						
19				1.16						
20				1.18						
21				1.20						
22				1.22			1.65			
23				1.25			1.71			
24				1.27			1.79			
25	1.05			1.30			1.86			
26	1.08			1.35			1.95			
27	1.12			1.41			2.05			
28	1.16			1.46	1.39	3.06	2.15			
29	1.19			1.52	1.44	3.17	2.26			
30	1.24			1.59	1.51	3.32	2.38			
31	1.28			1.65	1.57	3.45	2.49			
32	1.32			1.72	1.63	3.59	2.62	2.49	4.73	
33	1.37			1.79	1.70	3.74	2.75	2.61	4.96	
34	1.42			1.87	1.78	3.92	2.89	2.75	5.23	
35	1.47	1.40	3.63	1.95	1.86	4.08	3.03	2.88	5.48	
36	1.54	1.46	3.80	2.07	1.97	4.33	3.24	3.08	5.85	
37	1.62	1.54	4.00	2.19	2.08	4.58	3.47	3.30	6.27	
38	1.70	1.62	4.21	2.32	2.20	4.84	3.70	3.52	6.69	
39	1.79	1.70	4.42	2.45	2.33	5.13	3.95	3.75	7.13	
40	1.88	1.79	4.65	2.60	2.47	5.43	4.22	4.01	7.62	
41	1.98	1.88	4.89	2.75	2.61	5.74	4.50	4.28	8.13	
42	2.08	1.98	5.15	2.91	2.76	6.07	4.79	4.55	8.65	
43	2.19	2.08	5.41	3.08	2.93	6.45	5.11	4.85	9.22	
44	2.31	2.19	5.69	3.26	3.10	6.82	5.44	5.17	9.82	
45	2.43	2.30	5.99	3.45	3.28	7.22	5.79	5.50	10.44	
46	2.56	2.43	6.32	3.65	3.47	7.63	6.17	5.86	11.13	
47	2.69	2.56	6.66	3.87	3.68	8.10	6.57	6.24	11.86	
48	2.84	2.70	7.02	4.09	3.89	8.56	6.99	6.64	12.62	
49	2.98	2.83	7.36	4.33	4.11	9.04	7.42	7.05	13.40	
50	3.14	2.98	7.75	4.57	4.34	9.55	7.87	7.48	14.21	
51	3.30	3.14	8.16	4.83	4.59	10.10	8.34	7.92	15.05	
52	3.47	3.30	8.58	5.09	4.84	10.65	8.82	8.38	15.92	
53	3.64	3.46	9.00	5.37	5.10	11.22	9.32	8.85	16.82	
54	3.82	3.63	9.44	5.65	5.37	11.81	9.83	9.34	17.75	
55	4.01	3.81	9.91	5.95	5.66	12.44	10.35	9.84	18.69	
56	4.36	4.14	10.76	6.47	6.15	13.53	11.28	10.72	20.37	
57	4.74	4.50	11.70	7.04	6.69	14.72	12.29	11.68	22.19	
58	5.15	4.89	12.71	7.66	7.28	16.02	13.40	12.73	24.19	
59	5.59	5.31	13.81	8.33	7.91	17.40	14.60	13.87	26.35	
60	6.07	5.77	15.00	9.05	8.60	18.92	15.92	15.12	28.73	
61		6.27	16.30		9.36	20.59		16.47	31.29	
62		6.82	17.73		10.17	22.37		17.95	34.11	
63		7.41	19.27		11.06	24.33		19.56	37.16	
64		8.05	20.93		12.03	26.47		21.31	40.49	
65		8.75	22.74		13.08	28.78		23.22	44.11	
66		9.51	24.73		14.22	31.28		25.30	48.07	
67		10.33	26.86		15.47	34.03		27.57	52.38	
68		11.23	29.20		16.82	37.00		30.04	57.08	
69		12.20	31.72		18.29	40.24		32.73	62.19	

#### Columbian Financial Group Renewable Level Term Rider Gross Premiums - Other Insured May 16, 2008

	Male F	referred No	n-Tobacco	Male	Standard No	n-Tobacco		Male Toba	ссо
Age	Issue	Renewal	Guaranteed	Issue	Renewal	Guaranteed	Issue	Renewal	Guaranteed
18				2.26			2.65		
19				2.26			2.73		
20				2.27			2.81		
21				2.27			2.89		
22				2.28			2.97		
23				2.28			3.06		
24				2.29			3.15		
25	1.87			2.29			3.25		
26	1.90			2.34			3.34		
27	1.94			2.40			3.44		
28	1.97			2.45	2.35	5.07	3.55	3.40	6.51
29	2.01			2.51	2.41	5.20	3.65	3.49	6.68
30	2.06			2.58	2.48	5.36	3.77	3.61	6.91
31	2.10			2.65	2.54	5.49	3.90	3.73	7.14
32	2.15			2.72	2.61	5.64	4.03	3.85	7.37
33	2.20			2.80	2.69	5.82	4.17	3.99	7.63
34	2.25	0.00	F 47	2.88	2.76	5.97	4.32	4.13	7.90
35	2.31	2.22	5.47	2.97	2.84	6.15	4.48	4.28	8.18
36	2.40	2.31	5.71	3.12	2.99	6.48	4.75	4.54	8.68
37	2.50	2.40	5.94	3.27	3.13	6.79	5.04	4.81	9.19
38	2.60	2.50	6.20	3.44	3.29	7.14	5.34	5.10	9.74
39	2.71	2.60	6.46	3.61	3.45	7.49	5.66	5.40	10.31
40	2.83	2.71	6.75	3.80	3.64	7.91	6.00	5.73	10.94
41	2.95	2.83	7.06	3.99	3.82	8.30	6.35	6.06	11.56
42	3.08	2.95	7.37	4.20	4.02	8.74	6.72	6.41	12.23
43 44	3.21 3.35	3.07 3.21	7.68 8.05	4.41 4.64	4.21 4.43	9.16 9.65	7.11 7.51	6.78 7.16	12.93 13.65
44	3.50		8.41	4.87			7.93		14.42
46	3.68	3.35 3.52	8.85	5.15	4.65 4.92	10.13 10.72	8.45	7.56 8.05	15.35
47	3.86	3.69	9.29	5.13	5.19	11.32	8.99	8.57	16.33
48	4.06	3.88	9.79	5.75	5.19	11.98	9.57	9.12	17.38
49	4.00	4.08	10.31	6.09	5.49	12.68	10.19	9.71	18.50
50	4.50	4.30	10.88	6.45	6.15	13.43	10.19	10.33	19.68
51	4.75	4.54	11.50	6.83	6.51	14.22	11.56	11.01	20.97
52	5.01	4.78	12.13	7.24	6.90	15.08	12.31	11.72	22.32
53	5.28	5.04	12.80	7.67	7.31	15.98	13.10	12.47	23.74
54	5.58	5.33	13.56	8.13	7.75	16.95	13.10	13.25	25.23
55	5.88	5.61	14.29	8.61	8.20	17.94	14.77	14.06	26.76
56	6.43	6.13	15.64	9.44	8.99	19.68	16.25	15.46	29.42
57	7.04	6.71	17.15	10.34	9.85	21.57	17.87	17.00	32.35
58	7.70	7.34	18.78	11.35	10.81	23.68	19.65	18.69	35.56
59	8.44	8.04	20.60	12.46	11.86	25.99	21.63	20.57	39.13
60	9.25	8.81	22.61	13.68	13.02	28.54	23.79	22.63	43.05
61	0.20	9.66	24.82	10.00	14.30	31.36	_00	24.91	47.38
62		10.59	27.23		15.71	34.46		27.43	52.17
63		11.62	29.91		17.27	37.89		30.20	57.43
64		12.76	32.88		18.98	41.66		33.26	63.24
65		14.01	36.13		20.87	45.81		36.63	69.65
66		15.39	39.71		22.95	50.39		40.35	76.72
67		16.91	43.67		25.25	55.45		44.45	84.51
68		18.59	48.03		27.77	60.99		48.98	93.11
69		20.43	52.82		30.56	67.13		53.97	102.59

#### Columbian Financial Group Renewable Level Term Rider Gross Premiums - Other Insured May 16, 2008

	Female Preferred Non-Tobacco			Female Standard NonTobacco			Female Tobacco		
Age	Issue	Renewal	Guaranteed	Issue	Renewal	Guaranteed	Issue	Renewal	Guaranteed
18				1.64					
19				1.66					
20				1.68					
21				1.70					
22				1.72			2.15		
23				1.75			2.21		
24				1.77			2.29		
25	1.55			1.80			2.36		
26	1.58			1.85			2.45		
27	1.62			1.91			2.55		
28	1.66			1.96	1.89	4.06	2.65		
29	1.69			2.02	1.94	4.17	2.76		
30	1.74			2.09	2.01	4.32	2.88		
31	1.78			2.15	2.07	4.45	2.99		
32	1.82			2.22	2.13	4.59	3.12	2.99	5.73
33	1.87			2.29	2.20	4.74	3.25	3.11	5.96
34	1.92			2.37	2.28	4.92	3.39	3.25	6.23
35	1.97	1.90	4.63	2.45	2.36	5.08	3.53	3.38	6.48
36	2.04	1.96	4.80	2.57	2.47	5.33	3.74	3.58	6.85
37	2.12		5.00	2.69	2.58	5.58	3.97	3.80	7.27
38	2.20		5.21	2.82	2.70	5.84	4.20	4.02	7.69
39	2.29	2.20	5.42	2.95	2.83	6.13	4.45	4.25	8.13
40	2.38	2.29	5.65	3.10	2.97	6.43	4.72	4.51	8.62
41	2.48	2.38	5.89	3.25	3.11	6.74	5.00	4.78	9.13
42	2.58	2.48	6.15	3.41	3.26	7.07	5.29	5.05	9.65
43	2.69	2.58	6.41	3.58	3.43	7.45	5.61	5.35	10.22
44	2.81	2.69	6.69	3.76	3.60	7.82	5.94	5.67	10.82
45	2.93	2.80	6.99	3.95	3.78	8.22	6.29	6.00	11.44
46	3.06	2.93	7.32	4.15	3.97	8.63	6.67	6.36	12.13
47	3.19	3.06	7.66	4.37	4.18	9.10	7.07	6.74	12.86
48	3.34	3.20	8.02	4.59	4.39	9.56	7.49	7.14	13.62
49	3.48	3.33	8.36	4.83	4.61	10.04	7.92	7.55	14.40
50	3.64	3.48	8.75	5.07	4.84	10.55	8.37	7.98	15.21
51	3.80	3.64	9.16	5.33	5.09	11.10	8.84	8.42	16.05
52	3.97	3.80	9.58	5.59	5.34	11.65	9.32	8.88	16.92
53	4.14	3.96	10.00	5.87	5.60	12.22	9.82	9.35	17.82
54 55	4.32	4.13	10.44	6.15	5.87	12.81	10.33	9.84	18.75
55 56	4.51	4.31	10.91	6.45	6.16	13.44	10.85	10.34	19.69
56 57	4.86	4.64	11.76	6.97	6.65	14.53	11.78	11.22	21.37
57 59	5.24	5.00	12.70	7.54	7.19	15.72	12.79	12.18	23.19
58 50	5.65	5.39	13.71	8.16	7.78	17.02	13.90	13.23	25.19
59 60	6.09	5.81	14.81	8.83	8.41	18.40	15.10	14.37	27.35
60	6.57	6.27	16.00	9.55	9.10	19.92	16.42	15.62	29.73
61		6.77	17.30		9.86	21.59		16.97	32.29
62		7.32	18.73		10.67	23.37		18.45	35.11
63		7.91	20.27		11.56	25.33		20.06	38.16
64 65		8.55 0.25	21.93		12.53	27.47		21.81	41.49
65 66		9.25	23.74		13.58	29.78 32.28		23.72	45.11 49.07
66 67		10.01	25.73		14.72			25.80	
67 69		10.83	27.86		15.97	35.03		28.07	53.38
68		11.73	30.20		17.32	38.00		30.54	58.08
69		12.70	32.72		18.79	41.24		33.23	63.19

	Male	Male		Female	Female		Unisex	Unisex	
Issue	NonTobacco	NonTobacco	Male Tobacco	NonTobacco	NonTobacco	Female Tobacco	NonTobacco	NonTobacco	Unisex
Age	Preferred	Standard		Preferred	Standard	Горассо	Preferred	Standard	Tobacco
0		70.00			05.04			70.50	
0		76.99 79.13			65.91 67.95			72.56 74.66	
2		81.66			70.20			77.08	
3		84.44			72.63			79.72	
4		87.43			75.19			82.53	
5		90.58			77.86			85.49	
6 7		93.85 97.23			80.65 83.53			88.57 91.75	
8		100.75			86.50			95.05	
9		104.41			89.59			98.48	
10		108.19			92.80			102.03	
11		112.11			96.12			105.71	
12 13		116.14			99.54			109.50 113.39	
13		120.27 124.48			103.06 106.68			117.36	
15		128.73			110.40			121.40	
16		132.93			114.32			125.49	
17		137.17	.=		118.36	.=		129.65	
18 19		141.47	170.36 176.02		122.54	152.31		133.90	163.14 168.72
20		145.88 150.45	181.82		126.86 131.33	157.78 163.41		138.27 142.80	174.46
21		155.19	187.79		135.98	169.24		147.51	180.37
22		160.11	193.94		140.79	175.26		152.38	186.47
23		165.23	200.28		145.78	181.49		157.45	192.76
24	470.00	170.54	206.81	454.04	150.97	187.94	405.00	162.71	199.26
25 26	173.30 179.14	176.05 182.06		154.81 160.30	156.35 162.00	194.61 201.49	165.90 171.60	168.17 174.04	205.97 212.87
27	185.17	188.27	227.58	165.97	167.84	208.59	177.49	180.10	219.98
28	191.43	194.72		171.84	173.89	215.93	183.59	186.39	227.34
29	197.97	201.45		177.91	180.15	223.51	189.95	192.93	234.98
30	204.78	208.47	250.62	184.19	186.63	231.33	196.54	199.73	242.90
31 32	211.88 219.27	215.79 223.41	258.97 267.66	190.69 197.41	193.35 200.29	239.42 247.75	203.40 210.53	206.81 214.16	251.15 259.70
33	226.96	231.35		204.35	207.47	256.35	217.92	221.80	268.55
34	234.93	239.57	286.02	211.52	214.90	265.21	225.57	229.70	277.70
35	243.21	248.12		218.92	222.56	274.30	233.49	237.90	287.14
36 37	251.89	257.23	306.20	226.55	230.54	283.83	241.75	246.55	297.25
38	260.87 270.16	266.67 276.44	317.05 328.25	234.41 242.53	238.78 247.30	293.63 303.75	250.29 259.11	255.51 264.78	307.68 318.45
39	279.76	286.55		250.93	256.12	314.19	268.23	274.38	329.56
40	289.67	297.00		259.61	265.25	324.96	277.65	284.30	340.99
41	299.90	307.79	363.90	268.57	274.68	336.08	287.37	294.55	352.77
42	310.44	318.93		277.83	284.43	347.53	297.40	305.13	364.86
43 44	321.29 332.42	330.40 342.18	389.22 402.29	287.37 297.20	294.50 304.88	359.31 371.41	307.72 318.33	316.04 327.26	377.26 389.94
45	343.84	354.29	415.59	307.32	315.58	383.83	329.23	338.81	402.89
46	355.20	366.36	428.37	317.64	326.49	396.21	340.18	350.41	415.51
47	366.84	378.75		328.23	337.70	408.86	351.40	362.33	428.37
48 49	378.81	391.50	454.70	339.07	349.19	421.71	362.91	374.58	441.50
50	391.17 403.91	404.68 418.28	468.43 482.52	350.16 361.50	360.96 373.01	434.74 447.91	374.77 386.95	387.19 400.17	454.95 468.68
51	417.00	432.26		373.07	385.33	461.22	399.43	413.49	482.64
52	430.40	446.61	511.58	384.87	397.90	474.65	412.19	427.13	496.81
53	444.09	461.28		396.87	410.71	488.18	425.20	441.05	511.12
54 55	458.06 472.23	476.27 491.50	541.39	409.09 421.52	423.76	501.81	438.47 451.95	455.27 469.73	525.56 540.04
56	472.23 487.48	507.81	556.39 572.59	421.52	437.07 450.98	515.51 530.03	466.37	485.08	555.57
57	502.98	524.41	588.90	448.09	465.14	544.66	481.02	500.70	571.20
58	518.79	541.36		461.70		559.42	495.95		587.01
59	534.93	558.69		475.55	494.19	574.31	511.18	532.89	603.03
60 61	551.38 568.07	576.36 594.32		489.65 504.00	509.13 524.34	589.33 604.49	526.69 542.44	549.47 566.33	619.24 635.56
62	584.93	612.47		518.60	539.84	619.78	558.40	583.42	651.91
63	601.89	630.76	690.27	533.46	555.61	635.19	574.52		668.24
64	618.92	649.17	707.06	548.58	571.68	650.75	590.78	618.17	684.54
65	636.05	667.70		563.96	588.03	666.46	607.21	635.83	700.83
66 67	654.48 673.13	687.48 707.51		579.70 595.68	604.60 621.42	682.91 699.50	624.57 642.15	654.33 673.07	719.17 737.69
68	692.04	707.51		611.88	638.48	716.21	659.98	692.10	756.42
69	711.22	748.47		628.28	655.75	733.01	678.04	711.38	775.39
70	730.64	769.39	824.38	644.86	673.24	749.87	696.33	730.93	794.58
71	750.25	790.52		661.61	690.89	766.72	714.79	750.67	813.91
72 73	769.90 789.50	811.72		678.45 695.39	708.66 726.53	783.51 800.21	733.32 751.86		833.27 852.58
73 74	809.07	832.88 854.04		712.41	744.50	816.79	751.86	790.34 810.22	852.58 871.89
75	828.63	875.21		729.47	762.52	833.27	788.97	830.13	891.19
76	848.17	896.38	951.02	746.56	780.58	849.68	807.53	850.06	910.48
77	867.64	917.50		763.67	798.67	865.99	826.05	869.97	929.72
78 70	886.92	938.43		780.77	816.76	882.22	844.46	889.76	945.69
79 80	905.88 924.44	959.06 979.28		797.85 814.91	834.84 852.90	898.35 914.39	862.67 880.63	909.37 928.73	955.74 963.96
80	924.44	979.28	997.00	814.91	852.90	914.39	880.63	928.73	9

	Male	Male	Mala	Female	Female	Famala	Unisex	Unisex	Union
Issue Age	NonTobacco	NonTobacco	Male Tobacco	NonTobacco	NonTobacco	Female Tobacco	NonTobacco	NonTobacco Standard	Unisex Tobacco
	Preferred	Standard		Preferred	Standard		Preferred	Standard	
0		7.06			6.01			6.64	
1		7.26			6.20			6.84	
2		7.50			6.42 6.65			7.07 7.32	
4		7.76 8.04			6.89			7.58	
5		8.34			7.14			7.86	
6		8.65			7.40			8.15	
7		8.97			7.68			8.45	
8 9		9.31 9.65			7.96 8.25			8.77 9.09	
10		10.01			8.56			9.43	
11		10.39			8.87			9.78	
12		10.77 11.16			9.20			10.14	
13 14		11.16			9.54 9.88			10.51 10.89	
15		11.97			10.24			11.28	
16		12.38			10.62			11.68	
17 18		12.79	15 10		11.01 11.41	13.79		12.08	14.60
19		13.21 13.64	15.18 15.72		11.41	14.29		12.49 12.92	14.62 15.15
20		14.08	16.28		12.26	14.81		13.35	15.69
21		14.54	16.85		12.71	15.35		13.81	16.25
22 23		15.03	17.44		13.18	15.90		14.29	16.82
23		15.53 16.05	18.05 18.68		13.67 14.17	16.48 17.07		14.79 15.30	17.42 18.04
25	16.21	16.59	19.33	14.45	14.70	17.68	15.51	15.83	18.67
26	16.74	17.14	20.00	14.94	15.21	18.32	16.02	16.37	19.33
27 28	17.29	17.70	20.69 21.41	15.45	15.74	18.97	16.55	16.92	20.00 20.71
28 29	17.86 18.45	18.29 18.91	21.41	15.98 16.52	16.28 16.84	19.65 20.35	17.11 17.68	17.49 18.08	20.71
30	19.07	19.55	22.93	17.08	17.42	21.07	18.27	18.70	22.19
31	19.71	20.21	23.75	17.67	18.03	21.82	18.89	19.34	22.98
32 33	20.38 21.08	20.91 21.63	24.60 25.48	18.27 18.88	18.65 19.29	22.59 23.39	19.54 20.20	20.01 20.69	23.80 24.64
34	21.80	22.38	26.40	19.52	19.95	24.21	20.89	21.41	25.52
35	22.54	23.15	27.35	20.18	20.63	25.05	21.60	22.14	26.43
36	23.30	23.96	28.28	20.84	21.34	25.92	22.32	22.91	27.34
37 38	24.08 24.88	24.79 25.64	29.24 30.23	21.52 22.23	22.06 22.81	26.80 27.72	23.06 23.82	23.70 24.51	28.26 29.23
39	25.71	26.53	31.25	22.25	23.59	28.67	24.61	25.35	30.22
40	26.56	27.44	32.29	23.70	24.38	29.64	25.42		31.23
41	27.44	28.38	33.36	24.47	25.21	30.65	26.25	27.11	32.28
42 43	28.35 29.27	29.35 30.35	34.46 35.58	25.26 26.08	26.06 26.93	31.68 32.75	27.11 27.99	28.03 28.98	33.35 34.45
44	30.22	31.37	36.72	26.91	27.84	33.85	28.90	29.96	35.57
45	31.19	32.41	37.88	27.77	28.76	34.97	29.82		36.72
46 47	32.20 33.23	33.48 34.57	39.02 40.17	28.72	29.76 30.79	36.10 37.26	30.81	31.99 33.06	37.85 39.01
48	34.29	35.70	41.36	29.69 30.68	31.85	38.44	31.81 32.85		40.19
49	35.38	36.86	42.57	31.70	32.93	39.63	33.91	35.29	41.39
50	36.50	38.05	43.82	32.74	34.03	40.84	35.00	36.44	42.63
51 52	37.65 38.83	39.28 40.54	45.09 46.39	33.80 34.89	35.17 36.32	42.06 43.29	36.11 37.25	37.64 38.85	43.88 45.15
53	40.03	41.82	47.70	35.99	37.50	44.54	38.41	40.09	46.44
54	41.26	43.13	49.02	37.11	38.70	45.79	39.60	41.36	47.73
55 56	42.50 43.88	44.46 45.90	50.34 51.73	38.26 39.44	39.92 41.16	47.05	40.80	42.64	49.02 50.37
56 57	43.88 45.28	45.90 47.36	51.73 53.12	39.44 40.64	42.42	48.33 49.62	42.10 43.42	44.00 45.38	50.37 51.72
58	46.71	48.85	54.53	41.87	43.70	50.92	44.77	46.79	53.09
59	48.17	50.38	55.96	43.11	45.00	52.22	46.15		54.46
60 61	49.66 51.17	51.93 53.50	57.40 58.85	44.37 45.66	46.32 47.67	53.54 54.87	47.54 48.97		55.86 57.26
62	52.70	55.09	60.29	46.97	49.04	56.21	50.41	52.67	58.66
63	54.24	56.70	61.71	48.30	50.44	57.55	51.86	54.20	60.05
64	55.78	58.30	63.12	49.65	51.86	58.91	53.33		61.44
65 66	57.33 59.05	59.92 61.67	64.52 66.04	51.03 52.56	53.30 54.83	60.28 61.64	54.81 56.45	57.27 58.93	62.82 64.28
67	60.80	63.44	67.58	54.11	56.38	63.00	58.12		65.75
68	62.57	65.24	69.13	55.70	57.96	64.37	59.82	62.33	67.23
69	64.37	67.06	70.70	57.30	59.56	65.75	61.54	64.06	68.72
70 71	66.19 68.04	68.91 70.77	72.28 73.89	58.93 60.59	61.18 62.82	67.12 68.48	63.29 65.06		70.22 71.73
72	69.89	72.64	75.49	62.25	64.47	69.84	66.83		73.23
73	71.74	74.50	77.07	63.93	66.13	71.18	68.62	71.15	74.71
74 75	73.59	76.37	78.66	65.63	67.80	72.50	70.41	72.94	76.20
75 76	75.44 77.29	78.23 80.09	80.24 82.09	67.33 69.04	69.47 71.16	73.81 75.11	72.20 73.99		77.67 79.30
77	79.14	81.95	83.95	70.77	72.84	76.39	75.79	78.31	80.93
78	80.98	83.78	85.78	72.49	74.53	77.67	77.58	80.08	82.54
79	82.79	85.59	87.59	74.22	76.22	78.92	79.36		84.12
80	84.56	87.36	89.36	75.96	77.91	80.17	81.12	83.58	85.68

 SERFF Tracking Number:
 CMLM-125806065
 State:
 Arkansas

 Filing Company:
 Columbian Life Insurance Company
 State Tracking Number:
 40214

Company Tracking Number:

TOI: L071 Individual Life - Whole Sub-TOI: L071.101 Fixed/Indeterminate Premium - Single

Life

Product Name: 2001 CSO Flagship

Project Name/Number:

## **Supporting Document Schedules**

**Review Status:** 

Satisfied -Name: Certification/Notice 09/06/2008

**Comments:** 

In regard to Rule & Regulation 49 and the Consumer Information Notice, please see the information included in our filing letter on the General Information tab. If this information is not sufficient to "certify" these items, please let me know and I'll happily provide the information in a format you prefer.

#### Attachments:

AR Readability Certification [Flagship].pdf
AR\_CertofCompliance with Rule 19 [Flagship].pdf



DATE: September 9, 2008

TO: STATE OF ARKANSAS DEPARTMENT OF INSURANCE

RE: Form No. 1F149-CL, Whole Life Insurance Policy

Form No. 1E904-CL, Unisex Endorsement

Form No. 1H813-CL, Ten Year Renewable Level Term Rider

Form No. 1H814-CL, Other Insured Ten Year Renewable Level Term Rider

Form No. 1H815-CL, Paid Up Additions Rider - Single Premium

Form No. 1H816-CL, Paid Up Additions Rider - Increasing Death Benefit

This is to certify that the attached forms have achieved the required Flesch Reading Ease Test Score. These forms comply with the requirements of Ark. Stat. Ann 66-3251 through 66-3258, cited as the Life and Disability Insurance Policy Language Simplification Act.

Regina Akulis, ACS, AIAA, AIRC, ACP Contract Analyst

Regina M. akulis

# Certificate of Compliance with Arkansas Rule and Regulation 19

Form Number(s): 1F149-CL, Whole Life Insurance Policy 1E904-CL, Unisex Endorsement 1H813-CL, Ten Year Renewable Level Term Rider 1H814-CL, Other Insured Ten Year Renewable Term Rider 1H815-CL, Paid Up Additions Rider – Single Premium 1H816-CL, Paid Up Additions Rider – Increasing Death Benefit I hereby certify that the filing above meets all applicable Arkansas requirements including the requirements of Rule and Regulation 19. Southy M. Klie Signature of Company Officer Dorothy M. Klie, FLMI, AIRC Name Assistant Vice President, Policy Filing and Assistant Secretary Title September 9, 2008

Insurer: Columbian Life Insurance Company

Date